



# Adding to Your Toolbox: Oral Fluid Testing

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BY DR. TODD SIMO

# WHY IMPLEMENT AN ORAL FLUID DRUG TESTING PROGRAM

## A THIRD-PARTY PERSPECTIVE

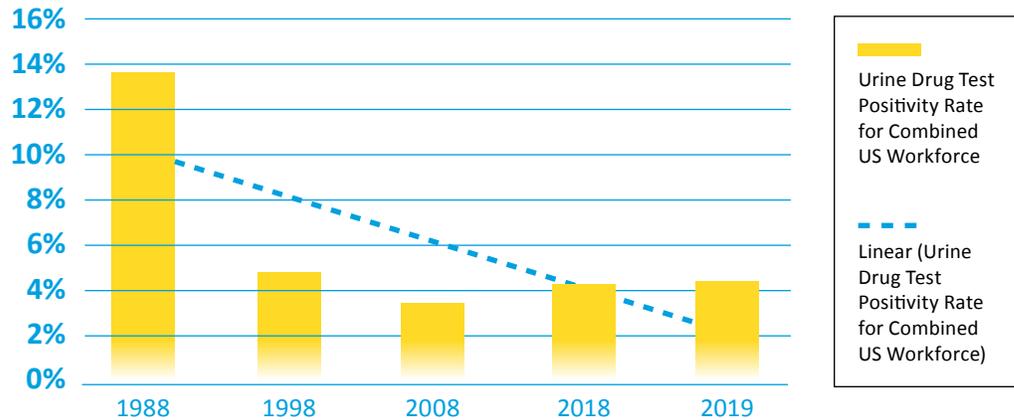
### **PREFACE**

*In my current role, I am the Chief Medical Officer for HireRight (an employment screening company). In that position, I am honored to serve approximately 10,000 clients that consumed well over 2.5 million drug tests in 2019. But in 2001 when I started my transition from clinic physician to running a drug-free workplace third party administrator (TPA) business, I was brokering about 50 urine drug tests per month from my clinic. I know the stresses that small businesses are under—every dollar matters. If you run a collection site, urine collections can be vital, revenue business. However, not having oral fluid testing as an arrow in your quiver ultimately puts you at a disadvantage, particularly for client use cases as delineated in this article.*

## IN THE BEGINNING, THERE WAS URINE

Many drug-free workplace programs began in the time when the Omnibus Transportation Act of 1991 was rolling out. The specimen of choice at the time was urine. The reasoning for it was sound. Urine was easy to collect and transport, inexpensive to test, accurate, and provided an adequate detection window; furthermore, urine testing at that time was difficult to adulterate or subvert as evidenced by the positive rates year over year.

### URINE DRUG TEST POSITIVITY RATE FOR COMBINED U.S. WORKFORCE



Source: Quest Diagnostics Drug Testing Index from 8/25/2020

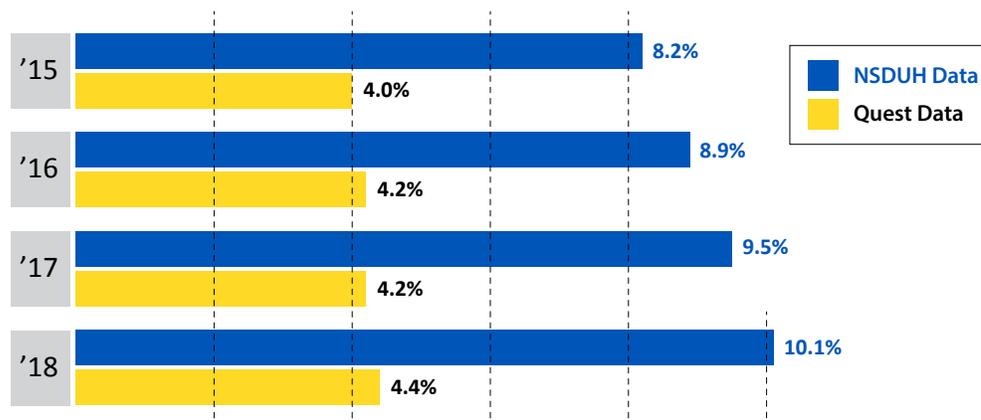
### Artificially Low Positivity Rates

In the late 1980s, urine drug screening programs showed nearly double-digit positive rates. Over time these rates have fallen dramatically. Due to the drop in the positive rate, suspicion amongst drug screening professionals is that positive rates on urine drug screens have become artificially low, demonstrating that a persistent population of illicit drug users has discovered ways to sidestep or subvert drug tests.

The chart below depicts Quest Diagnostic lab positive rates from 2015 and 2019 compared to self-reported illicit drug use from a study conducted by the National Survey on Drug Use and Health. Self-reported illicit drug use is more than two times higher than urine lab detection.

While urine remains the “gold standard” specimen for drug testing, urine positivity rates have decreased over time to around a 4.0% level. This divergent data suggests that an alternate specimen may benefit some employers seeking a more robust drug-free workplace solution.

### PAST MONTH SELF-ADMITTED ILLICIT DRUG USE VS. QUEST DIAGNOSTIC'S URINE POSITIVE RATE



Source: 2019 National Survey of Drug Use and Health Quest Drug Testing Index

## Why Offer Oral Fluid Screening for Your Clients?

### ORAL FLUID POSITIVES ON THE RISE

While positive rates for urine have remained fairly stable (only incrementally increasing) year over year, oral fluid positives are on the rise, which reveals a more accurate view of current usage. Our HireRight data shows that the rate of Medical Review Officer (MRO) verified positives using oral fluid testing has consistently been higher than urine. In 2015, it was 4.0%, and it has consistently risen since then (6.0% in 2019 with a high watermark of 7.5% in 2018). To put that positive rate in context, oral fluid's MRO positive rate is 300% higher than our urine-based MRO positive tests.

### WINDOW OF DETECTION

Oral fluid is excellent for detecting recent drug use. The window of detection for oral fluid is one to two days for all substances, whereas the window of detection for urine extends to weeks. This timeframe more closely mirrors the impairment window—the duration of time an individual is impaired by drug use. That means if someone gets a positive result on an oral fluid drug screen, they may have been impaired when the sample was collected.

### DRUGS IT CAN SCREEN FOR

Most oral fluid screens are 5-panel tests that look for cocaine, amphetamine, opiates, phencyclidine, and cannabinoids (THC). Broader panel tests are available, which include additional analytes such as benzodiazepines, barbiturates, and methadone.

### MARIJUANA AND ORAL FLUID

With the ever-shifting sands of marijuana decriminalization, oral fluid is the one current drug testing specimen that can be used to make a determination of occupational safety impairment at the time of collection. The reason is that oral fluid's known detection window is 20 hours or less; however, there is ever growing evidence that THC causes impairment for periods greater than 24 hours. This means that if someone tests positive for marijuana (THC) using oral fluid, the donor is most likely impaired or under the influence at the time of collection, and any adverse employment action taken is based upon impairment and not just simply being positive. This impairment determination may allow employers to take negative employment action on candidates/employees even in states that require accommodation for decriminalized marijuana use.



### GROWING IN PREVALENCE

Oral fluid testing is becoming more and more popular for employment drug screening programs. It's currently FDA-approved for drug-free workplace programs. In the HireRight world, from 2017 to 2019, the number of employers who used oral fluid rose 72%, and I expect this trend to continue, especially since oral fluid has been approved as the second specimen for federally regulated testing.

### What Type of Companies /Programs is Oral Fluid Testing Best Suited For?

With a window of detection that mirrors the impairment window, oral fluid testing is an excellent fit for certain types of employment screening.

It is beneficial for incumbent employee programs that test regular workers at random and for-cause/reasonable suspicion. If the test shows positive, it means the employee is likely still under the influence and possibly impaired. Conversely, oral fluid is not ideal for companies that perform pre-employment screening as their sole deterrent for illicit drug use, since applicants who use illegal substances can abstain from drugs for a couple of days before the test and get a clean result, even if they're regular users.

In general, oral drug testing also works best for businesses with static facilities—places where employees regularly come into a facility to work. Examples might include a warehouse or manufacturing plant, or companies with white-collar jobs for which people come to an office every day.

Some companies would benefit from random testing, but don't implement it because they think they'll lose significant staff-hours and productivity because employees must leave and get tested at a collection site. This isn't the case with oral fluid testing, which can be done in just 10 minutes on site.

### Conclusion

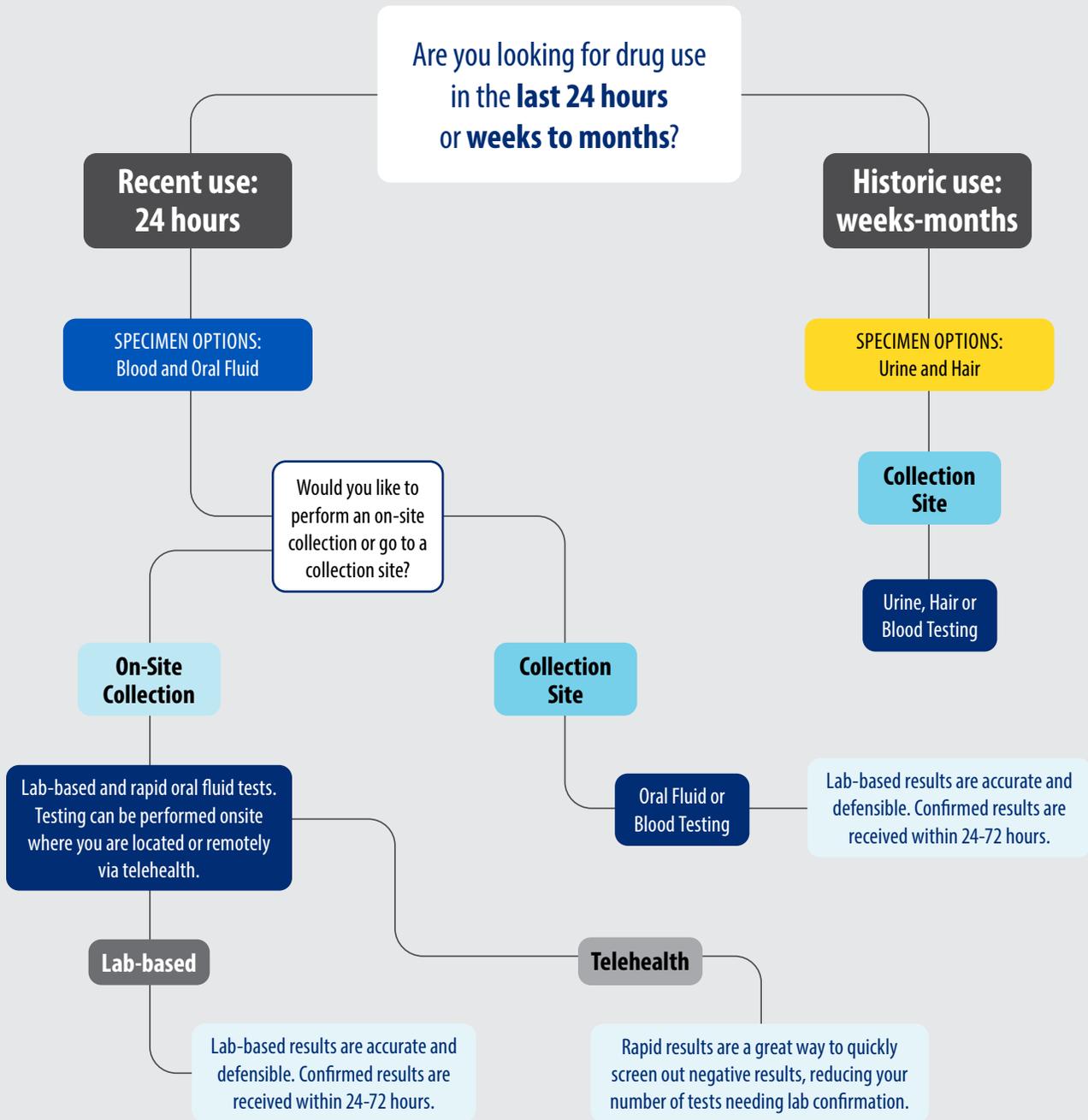
As a third party administrator, one of your chief roles is being a trusted advisor to your clients pertaining to their drug-free workplace programs. Having a discussion about oral fluid with your clients can make a real impact. Because in the end, helping clients configure a solution that works best for them is ultimately the best business decision for you and your company.

ASK THE EXPERTS:

# WHAT DO I DO?

Dealing with a positive test result can lead to many questions. Here is a handy guideline\* for handling a tricky situation.

## RECENT OR HISTORIC OCCURRENCE OF DRUG USE



\*This is a general guideline, consult applicable laws and case law in your state(s) of operation before taking action based on a marijuana confirmed positive drug test result.

# Adding to Your Toolbox:

# Oral Fluid Testing

## AN INTERVIEW

"I trust oral fluid testing and think it is the wave the future."

*This information is provided for educational purposes only. Reader retains full responsibility for the use of the information contained herein.*

Oral fluid drug testing is getting a lot of attention due to two major events that have occurred in the past year.

First, in October 2019 the Substance Abuse and Mental Health Services Administration (SAMHSA) issued final mandatory guidelines for the use of lab-based oral fluid drug testing in federal workplaces. It was the first new endorsement of a drug testing method by the federal government in more than 30 years and established, for the first time, lab-based oral fluid testing in the workplace as a "gold" standard.

Second, the COVID-19 pandemic has created problems for some companies to get urine sample collections done, thus motivating employers to find alternative drug testing methods in order to work around obstacles and maintain their workplace programs.

More recently, the Office of Drug and Alcohol Policy Compliance (ODAPC) within the U.S. Department of Transportation (DOT), an agency that mandates more than six million drug tests a year of private-sector safety-sensitive transportation workers, issued a new version of the required Custody and Control Form (CCF).<sup>1</sup> The new form includes a box to indicate which specimen was collected, urine or oral fluid, perhaps a significant indicator of DOT's intention to allow lab-based oral fluid testing sooner rather than later.

What's the Buzz recently met with Tom Ellis, CEO of Croft Workplace Drug Testing, a national TPA based in Arizona. Tom became a fan of lab-based oral fluid drug testing years ago when he was looking for ways to help his clients maximize their return on investment in drug testing and to give him an upper hand when competing for business against other drug test providers.

**WTB:** Tom, you've been providing lab-based oral fluid drug testing for a while now. What you would say are some of the advantages of oral fluid testing?

**TE:** First, let me say that as a TPA, I trust oral fluid testing and think it is the wave the future. More than half of our clients already use oral fluid testing, and some have asked that we only use oral fluid testing.

# Oral fluid testing sells itself when you know how to explain the advantages.

Oral fluid testing is non-invasive, and every collection is directly observed; therefore, it is far more difficult to subvert the testing process.

It also solves collection delays due to a shy bladder or when a donor has just gone to the restroom prior to testing.

**WTB: Many of your clients utilize traditional urine drug testing. How do they react when you bring up the subject of oral fluid testing?**

TE: I find the best time to bring it up is following a known or suspected problem such as drug test cheating, a large number of diluted specimens, or shy bladders. Then we offer to set up a parallel program of oral fluid testing to compliment or support their urine testing program. This way the client can see how the two methods work side-by-side.

We also emphasize that this is not a point-of-collection device, but rather a lab-based testing system with fully confirmed results. They typically ask if it is a full drug panel, and if they can test for the same drugs as their urine testing program, and we explain that it is.

**WTB: How common is drug test cheating and how does oral fluid testing help solve the problem?**

TE: With urine testing we count out-of-temp specimens and other attempted subversions on a weekly basis because they are so numerous.

We relay that type of information to our clients on a regular basis. This is when we typically discuss the need to consider oral fluid testing as a back-up or to complement to urine testing. This way, if there is something that seems amiss with a urine specimen, we can automatically shift to an oral fluid sample.

Designated Employer Representatives (DERs) are usually quick to see and appreciate how many problematic samples we are able to back up with an oral fluid test and they become fans of the process.

**WTB: When does an automatic oral fluid back-up test occur?**

TB: Any time our collectors suspect something on a non-regulated collection may hinder or slow the process (shy bladder, dilute, out-of-temp, unusual odor/color, etc.), we immediately shift to an oral fluid collection.

**WTB: How long does it usually take for the client to see bottom-line results from this automatic back-up approach?**

TE: Typically, within two or three billing cycles the cost savings becomes apparent. Even though we charge more for oral fluid testing, the overall savings in time and fewer repeat collections is easy to measure. In some cases, after less than six months clients have asked to completely shift to oral fluid testing.

**WTB: What type of company is most likely to shift to oral fluid testing?**

TE: Actually, employers from nearly every sector we serve have adopted our approach.

**WTB: Do many companies conduct their own oral fluid collections?**

TE: Most companies prefer to have a professionally trained person conduct the collection. However, some actually prefer doing their own collections (especially if they are in remote locations). When a remote company gets frustrated with trying to locate a traditional urine collection facility, we offer to train them to collect oral fluid

samples and ship them directly to the lab. They are often surprised by how easy it is.

**WTB: If a company conducts its own oral fluid collections, whom within the company typically does the collection?**

TE: We always discourage using standard employees as collectors. In fact, we will only train managers or supervisors, and prefer those who are part of safety or human resources. We also ask that they allow us to train the in-house collectors directly.

Additionally, we provide the collection kits complete with the device, chains of custody, reminder instructions, specimen bags and an air bill. We make it completely turnkey and bulletproof.

**WTB: Why would a TPA be reluctant to offer oral fluid testing?**

TE: Honestly, I don't know, unless they're relying on old data and old misconceptions and don't understand all the advantages. I really believe all TPAs should offer it. Oral fluid testing sells itself when you know how to explain the advantages.

It builds upon the trust with your clients. For example, we only recommend oral fluid testing if we honestly believe it will be the right fit for a particular client. There are still times when a company must do urine testing. Some clients may be resistant, but most employers are looking for easier and better ways to get the job done.

Oral fluid may not replace urine testing right now, but I believe it is the future of drug testing.

1. "Guidance: Revised Federal Drug Testing Custody and Control Form." U.S. Department of Transportation, 31 Aug. 2020. [www.transportation.gov/odapc/Notice\\_CCF\\_August\\_2020](http://www.transportation.gov/odapc/Notice_CCF_August_2020).

# HOW DOES ORAL FLUID DRUG TESTING FIT INTO YOUR WORKFLOW?

BY BRIAN P. FEELEY

Three months after the start of the COVID-19 pandemic we co-sponsored a survey with the Current Consulting Group to see how the pandemic was affecting workplace drug testing. In the survey 7.6 percent of employers indicated they had recently switched to oral fluid testing and another 12 percent said they are planning to switch.<sup>1</sup> If the combined 19.6 percent of employers actually add or switch to oral fluid testing, it would represent a dramatic realignment of drug testing market share. And because the U.S. Department of Transportation (DOT), as of now, still does not permit oral fluid testing, this nearly 20 percent movement does not include any DOT-mandated tests. We also found that just over half of drug testing providers admitted that clients were experiencing trouble arranging traditional urine collections at off-site locations.

Oral fluid drug testing, which was endorsed by the Substance Abuse and Mental Health Services Administration (SAMHSA) in October 2019, offers Third-Party Administrators (TPAs) a viable option when working with clients who are struggling to get drug tests conducted under these very challenging circumstances.

## Why TPAs Offer Oral Fluid

TPAs are continually looking for ways to add value to their clients' drug testing programs and distinguish themselves from the competition. While urine testing has long been a common method of drug testing, many TPAs are discovering that oral fluid testing appeals to employers seeking to streamline the drug testing process.

Oral fluid drug testing provides employers with an important option when it comes to meeting the biggest challenges they face when trying to screen job applicants. In a recent report, HireRight identified employers' top five drug testing needs as:

1. reducing time-to-hire,
2. improving overall efficiency in the screening process,
3. verifying information,
4. getting quality information, and
5. ensuring a positive candidate experience.<sup>2</sup>

Oral fluid testing helps TPAs meet those needs for their clients. An oral fluid collection is a very non-invasive experience, which can be conducted virtually anywhere, anytime. It eliminates the need to secure a restroom, sanitize a toilet stall or send someone to an offsite facility, all of which are common practices with urine sample collections. Lab-based oral fluid testing makes it possible for TPAs to guarantee an accurate lab-based test result in the same amount of time it takes to get a urine test result.

Oral fluid testing also helps TPAs maintain control over the collection process and the overall workflow. TPAs are not required to maintain an inventory of oral fluid devices because the labs can drop ship the devices directly to the end user or the collection site. Therefore, TPAs maintain control over the device being used for collections, when and where a collection takes place, and the time that it takes to arrange and execute a sample collection. Less time spent managing collections means more time for finding new business and retaining existing business.

Most TPAs agree that they spend far too much time dealing with collector errors, adulteration issues, and redoing collections of unfit-for-testing samples. Oral fluid eliminates those issues most of the time because the collection process is relatively hassle-free, and every collection is 100 percent observed leaving virtually no opportunity for switching or adulterating a sample.

## Controlling Cost to Win Business

The COVID-19 pandemic has put many drug testing companies, especially TPAs, in a precarious position. Decreased revenues from months of lockdowns and reduced business have cut deeply into clients' operating budgets. This means less money for drug testing despite a strong need to continue screening individuals for drugs, especially as millions of Americans seek work after months of unemployment. For this reason, TPAs and their customers are looking for screening options that cut the time it takes to conduct a collection, such as employee-driven collections.

We all like to see concepts explained in real numbers that we can apply to our world. TPAs often use real numbers that clearly illustrate return on investment (ROI) so clients can compare various testing methods. Demonstrating a client's real ROI from oral fluid testing requires calculating the true cost of each part of the drug test and comparing it to the equivalent cost of a urine test.

The true cost of a drug test includes hard dollars costs (fees paid for a sample collection, including the device, lab analysis, confirmation testing, and MRO verification) and indirect costs (including intangibles like time away from work for the person being tested, a supervisor or test coordinator/observer, etc.) The following chart compares hard and soft dollar costs for lab-based oral fluid and urine testing. *NOTE: this is just an illustration, your actual figures may vary.*

LAB-BASED COST FACTORS	URINE	ORAL FLUID
<b>COLLECTION</b> Fee end-user pays for a sample collection	\$15.00	\$0.00*
<b>LAB ANALYSIS</b> Fee end-user pays for lab analysis of a sample	\$18.00	\$30.00 (includes collection device)
<b>CONFIRMATION TESTING</b> Fee for lab to confirm a presumptive positive is typically bundled into the lab analysis fee	\$0.00	\$0.00
<b>MRO VERIFICATION</b> Fee for MRO services (positive & negative)	\$5.00	\$5.00
<b>EMPLOYEE LOST-WORK TIME</b> (worker hourly rate of \$12 x 1.5 hours for urine vs. .25 hours for oral fluid)	\$18.00	\$4.00
<b>SUPERVISOR LOST-WORK TIME</b> (supervisor hourly rate of \$32 x 1.5 hours for urine vs. .25 hours for oral fluid)	\$48.00	\$8.00
<b>TRUE COST</b> of a Urine Test vs. an Oral Fluid Test	\$104.00	\$47.00



Oral fluid testing makes it possible for TPAs to offer their clients a lab-generated result while reducing the time it takes to collect a sample. Clients see a savings in lost productivity as employees and supervisors spend less time away from work participating in the collection process. Ultimately, the true cost of an oral fluid drug test is about 54% less than the true cost of a urine test.

So that's the revenue model TPAs can use to help clients understand the value of lab-based oral fluid testing; but what about the TPA's revenue?

- First, keeping clients satisfied by meeting their needs of making drug testing more efficient and cost-effective is, in a significant way, part of the TPA's revenue.
- Second, oral fluid collections do not require a TPA to locate a suitable offsite collection facility, which oral fluid makes possible with every collection, which saves the TPA time and money.
- Third, even when a client insists that the TPA visit their worksite to conduct the oral fluid collections, the TPA still saves time and money because an oral fluid collection is much quicker and eliminates the need to secure a restroom and implement precautions to thwart cheating efforts, which are common with urine collections.

### What is Causing the Increased Interest in Oral Fluid?

Bob Dylan famously sang "The times they are changing." And 2020 has made those words ring truer than ever. The COVID-19 pandemic has forced TPAs and employers to look for more efficient, safer and more reliable ways to conduct

1. "The COVID-19 in the Workplace Survey." The Current Consulting Group, June 2020.  
 2. "2019 Employment Screening Benchmark Report." HireRight, 2019.

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drug testing. In this regard, oral fluid testing has several unique advantages that make it appealing to buyers and sellers of drug testing. Following are some issues worth considering:

- **RECENT-USE DETECTION.** Drugs are detectable in an oral fluid sample within minutes after using a drug making it the only recent-use drug testing method endorsed by the federal government. This is of particular importance in states that prohibit employers from taking adverse employment action against someone who tests positive for marijuana unless the employer can show the person was impaired.
- **WINDOW OF DETECTION.** Marijuana is typically detectable in an oral fluid sample for up to 24 hours (usually less) versus several days as is the case with urine. This is helpful in states that have legalized the recreational use of marijuana and prohibit employers from discriminating against anyone for the lawful use of legal substances such as pot. Oral fluid testing makes it possible for employers to test for marijuana without peering into workers' private lives beyond several hours, but still allowing for the identification of those high-risk employees using marijuana on the job.
- **COLLECTIONS.** During the pandemic, many employers have found it challenging to arrange traditional urine collections at off-site locations. More than 50 percent of drug testing providers indicated in the COVID-19 in the workplace survey that they have clients who are having trouble arranging urine collections because offsite facilities used in the past are closed, have reduced their hours of operation or are too busy conducting COVID testing. Because oral fluid samples can be collected anywhere, anytime, arranging sample collections is easier for both the employer and the TPA.

- **FEDERAL ENDORSEMENT.** The federal government endorsed lab-based oral fluid drug testing as an accurate and legally defensible alternative to urine testing. SAMHSA's final mandatory guidelines for lab-based oral fluid drug testing (OFMG), which initially apply to federal workplaces, provide non-government employers with a gold-standard for using lab-based oral fluid testing.

### Conclusion

For TPAs, as with all businesses, the bottom line is always the bottom line. In these uncertain times with substance abuse up dramatically during the COVID-19 pandemic, employers are looking for ways to maintain drug-free workplaces within the confines of reduced budgets and an explosive season of hiring.

Oral fluid drug testing represents an alternative testing method with an attractive option for increasing revenue for sellers and the buyers of drug testing. Collections are easy to conduct, flexible to arrange, and very difficult to cheat on. Lab-based results are accurate, legally defensible and available within the same timeframe as urine test results.

TPAs help add value to their clients' drug testing programs by offering oral fluid testing in addition to traditional testing methods. It is a proverbial "win-win" for TPAs and their customers.



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