

Making the most of your tobacco incentives



Summary



The dollars employers pay out to individuals who falsely claim they do not use tobacco can more than offset the cost of adding cotinine testing to their existing biometric wellness screening programs.

Many employers provide financial incentives to employees who do not use tobacco or who are attempting to quit tobacco. To attain the incentive or to avoid the surcharge for using tobacco, it is customary for employers to rely on participants to self-report or attest to the fact they are tobacco-free. In the 2014 Towers Watson/National Business Group on Health (NBGH) Employer Survey of 595 large employers, 42% indicated they currently use a tobacco surcharge. Among those who used a tobacco surcharge, the average health insurance premium surcharge paid by tobacco users was \$520¹. Based on the significance of that dollar amount, it is clear that accurately detecting tobacco usage is important. To protect the integrity of their programs employers are increasingly turning to cotinine testing, a metabolite that detects the presence of nicotine, to identify participants who use tobacco.

Analysis



Quest Diagnostics Health & Wellness is a leading provider of employer-sponsored biometric wellness screening programs. The aim of this analysis is to isolate the potential value of identifying those who falsely claim that they are not tobacco users. In 2014, 47,824 screening participants were asked about their tobacco use in a health questionnaire, and then tested for blood cotinine. Nearly one in 10 tested positive for cotinine (9.7% or 4,636 of 47,824 participants). Of those who tested positive, 268 participants, or 5.8%, claimed to have never used tobacco. Another 685 participants, or 14.8% identified themselves as former users of tobacco. So 20.6% of those who tested positive (953 of 4,363), identified as non-users of tobacco.

In addition, among those who tested positive for cotinine, 1,244 (or 26.8%) self-identified as social or occasional users of tobacco.

This represents a significant proportion of tobacco users. Participants who categorize themselves as social users or occasional users of tobacco may consider themselves non-tobacco users and/or believe their habit is not risky to their health. Their positive results, however, suggest they used tobacco very close to their wellness screening and their use may be more than occasional.

Table 1. Self-Identified tobacco status for positive cotinine participants (N=4,636)

# Positive (N=4,636)	Tobacco use status	Percent of positive users
Never used tobacco	268	5.8%
Ex-user	685	14.8%
Social user	1,244	26.8%
Current user	2,439	52.6%

20.6% of those who tested positive for cotinine, identified themselves as non-users of tobacco.

Cost benefit



There are cost and program integrity benefits associated with incorporating cotinine testing into biometric wellness screenings. Multiplying the average tobacco “surcharge” of \$520 identified in the 2014 Towers Watson/NBGH survey by the 953 participants who tested positive for cotinine but claimed they were not tobacco users amounts to \$495,560 in surcharges that were not accurately assessed. This would cover the cost of a cotinine testing program if the charge is \$10.36 or less per participant.



Conclusion



It is expected that the use of tobacco incentives (rewards and penalties) will continue to increase in the coming years as more employers seek to hold employees accountable for their health. Cotinine testing is one way to help ensure that your incentive dollars are being applied to the appropriate individuals.