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# The 2026 Drug Landscape: What Employers Need to Know



## Navigating the 2026 Drug Landscape With Smarter Workplace Screening

The 2026 drug landscape is defined by the rise of fentanyl, the dangers of counterfeit pills, and an increase in polysubstance use, all of which present heightened risks for employers. While some trends, such as marijuana positivity and overall workforce detection rates, remain stable, the complexity of today's drug supply demands new approaches to workplace safety. Short-window testing methods often miss intermittent or combined use, leaving organizations vulnerable to hidden risks. Hair testing offers a longer detection window, stronger deterrence, and more defensible results, giving employers a clear advantage in managing safety, accountability, and insurance exposure in this evolving environment.

**This whitepaper examines how hair testing helps employers keep pace with today's more complex drug landscape by closing the gaps left by short-window testing. It highlights the safety, liability, and cost impacts of missed detection, and explains how hair testing strengthens deterrence and supports more defensible hiring decisions.**

## Shifting Realities in 2026

The drug-threat landscape in 2026 is shifting in ways that demand employer attention. Key developments include the rise of ultra-potent synthetic opioids such as fentanyl, the explosion of counterfeit pills laced with multiple substances, and the marked increase in polysubstance use. At the same time, regional trends are diverging, with certain states and industries experiencing sharper upticks than others. For employers, particularly those operating in safety-sensitive, high-turnover, or insurance-exposed environments, these shifts change the calculus of hiring, risk, and drug screening program design.

### Fentanyl: A Persistent and Growing Threat

Fentanyl continues to dominate the overdose-death landscape. According to the Drug Enforcement Administration (DEA) 2025 National Drug Threat Assessment, “illicitly manufactured fentanyl and analogs remain the most common drugs identified in U.S. drug poisoning deaths.” For employers, the implication is unsettling: new test data show that in 2024, the positivity rate for fentanyl in random workplace tests was 1.13%, compared to 0.14% during pre-employment screening — a more than 7-fold difference. This suggests two things: (1) fentanyl use is occurring after hire or circumventing pre-hire tests; and (2) traditional pre-employment screens may no longer suffice as the primary deterrent.

In addition, a large share of fentanyl positives is now co-positive for other drugs. In 2024, about 60% of fentanyl positive workforce urine tests also contained one or more additional substances, with marijuana (22%) and amphetamines (16%) among the most common co-positives. This underscores the rise in polysubstance risk, discussed further below.

**Six of every ten** counterfeit pills seized in 2022 contained a potentially lethal (two-milligram) dose of fentanyl.

### Counterfeit Pills and Illicit Stimulants

Counterfeit pills, those that mimic prescription medications (e.g., oxycodone, Xanax) but contain fentanyl, fentanyl analogs, or synthetic stimulants, remain a major threat. In Ohio alone, seizures of counterfeit pills containing potentially lethal doses of fentanyl rose dramatically. In one report, six of every ten counterfeit pills seized in 2022 contained a potentially lethal (two-milligram) dose of fentanyl, up from four of ten in 2021.

Moreover, the illicit stimulant market is resurging. Data from the 2024 DTI (Drug Testing Index) show cocaine positives rising 9.1% (from 0.22% to 0.24%) between 2022 and 2023 in the general U.S. workforce. For employers, this combination of stimulants and opioids in the illicit supply adds another layer of risk: impairment, erratic behavior, and increased safety incidents.

### Kratom and 7-Hydroxymitragynine: A Quiet but Growing Workplace Risk

Another emerging shift in the 2026 drug landscape is the increasing prevalence of kratom and its potent active alkaloid, 7-hydroxymitragynine (7-OH). Often marketed as a “natural” or “herbal” supplement, kratom is widely available in gas stations, smoke shops, and online, frequently without meaningful consumer warnings or dosage controls. This accessibility, combined with regulatory ambiguity, has contributed to growing use among working-age adults.

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While kratom is commonly perceived as benign, its pharmacological profile tells a different story. Kratom alkaloids act on opioid receptors and can produce stimulant effects at low doses and opioid-like sedative effects at higher doses. The risks escalate significantly with concentrated products, particularly those containing elevated levels of 7-hydroxymitragynine, which is substantially more potent than morphine at the receptor level. For employers, this raises concerns around impairment, dependency, and inconsistent performance that may not be immediately apparent through observation alone.

Public health agencies have increasingly linked kratom use to adverse outcomes, including dependence, withdrawal symptoms, seizures, liver toxicity, and overdose, especially when combined with other substances. Importantly, kratom frequently appears in polysubstance contexts, where it is used alongside opioids, stimulants, or benzodiazepines. This aligns with broader trends discussed earlier in this section, reinforcing that emerging risks are rarely isolated to a single substance.

From a workplace perspective, kratom presents a unique challenge. Many standard drug-testing panels do not include kratom or 7-OH, allowing regular use to go undetected. Employees may assume that because kratom is legal in many jurisdictions, it is permissible or risk-free from a policy standpoint. This disconnect creates blind spots in safety-sensitive environments, particularly in roles involving driving, machinery operation, or decision-making under pressure.

As the drug supply evolves beyond traditional categories, kratom exemplifies a broader reality employers face in 2026: risk is increasingly driven by substances that sit outside conventional testing frameworks but still impair performance and increase liability exposure. Employers that fail to monitor and address these emerging substances may find their programs outpaced by the realities of the modern drug landscape.

### Polysubstance Use: The New Normal

One of the most pressing challenges facing employers today is not the use of a single drug, but the increasing prevalence of polysubstance use, the simultaneous or sequential use of multiple substances. This trend dramatically raises safety risks, as combinations such as fentanyl and stimulants, or fentanyl, amplify impairment, unpredictability, and overdose potential.

Traditional short-window testing methods, such as urine and oral fluid testing, frequently miss these patterns because they are designed to capture only recent use within a matter of days. A worker may use one drug over the weekend and a different substance later in the week, with neither detected if testing does not occur at just the right time. As a result, employers relying solely on short-term modalities risk overlooking chronic or alternating use that directly affects workplace performance and safety.

**Hair testing provides a critical advantage in this environment.** With a 90-day detection window, it captures sustained and varied patterns of substance use rather than just isolated incidents. This broader perspective allows employers to identify individuals who may not appear positive on a short-window test but who are, in fact, engaged in repeated or mixed drug use. Importantly, hair analysis can detect multiple substances simultaneously, providing a clearer picture of polysubstance use and its potential impact on safety and productivity.

In an era where polysubstance use is increasingly the rule rather than the exception, hair testing enables organizations to move beyond snapshots in time and instead monitor the broader arc of employee behavior. This approach gives employers the defensible evidence they need to protect their workforce and reinforce a culture of accountability.

### Regional and Industry Variation

While these national trends matter, risk is not uniformly distributed. For instance, in states where cannabis is legal, marijuana positivity in the workforce has increased more sharply. Safety-sensitive industries such as oil and gas, manufacturing, transportation, etc. show higher risk exposure to fentanyl and polysubstance use through post-accident testing data. Employers in multi-state operations must calibrate their testing policy to regional prevalence, state law, and industry exposures rather than applying a “one-size-fits-all” approach.

## What's Stable (But Still Important)

While many things are shifting, some core employer-risk paradigms remain:



### Marijuana's Growth Trajectory

Though clear increases continue, the pattern remains consistent – marijuana positivity keeps climbing, especially in legal states.



### Employers Still Benefit From Testing as Deterrence

Numerous studies continue to show that drug-free workplace programs reduce absenteeism, safety incidents, and turnover. The challenge now is adapting the program to the evolving supply.



### Pre-Employment Testing Remains Necessary, Yet Insufficient

Given the rise in post-hire use (especially fentanyl), relying exclusively on pre-employment screening is an incomplete strategy.

## Why These Trends Matter for Employers



### Hiring and Retention Risk

In talent-short markets, especially for hourly, shift, or safety-sensitive roles, employers often speed up hiring. But if candidates pass pre-employment tests but then initiate substance use (or shift to substances that evade classic panels), the program has weaknesses. As data shows, random and surprise tests have found a 700%+ increase over pre-employment screens for candidates initially screened by urine. That gap is a red flag for hiring risk.



### Safety, Incident, and Liability Exposure

Higher potency substances, like fentanyl, and stimulant/opioid mixes, elevate impairment risk, resulting in increased potential for workplace accidents, near-misses, and liability. For safety-sensitive operations (driving, lifting heavy equipment, and handling hazardous materials), the margin for error is minimal. An employer who underestimates the risk of these newer threats may be unprepared for the consequences.



### Insurance and Workers' Compensation Cost

Insurers and workers' comp carriers increasingly scrutinize drug-screening programs. Carriers view testing programs that identify deeper-risk use (e.g., chronic polysubstance use) more favorably because they reduce incident severity. Employers lagging in adapting to new supply threats may face higher premiums, underwriting push-back, or worse claim outcomes.



### Legal and Program-Defensibility Considerations

With new substances constantly emerging and entering the illicit market, employers must ensure their testing panels and policies remain defensible. If an incident occurs and the employer policy omits key provisions or draws on outdated panels, the defense in litigation is weakened. Employers must update policy, testing modalities, and documentation accordingly.

## How Employers Should Respond: Strategic Implications

### Expand Panel Scope and Modalities

Given the rising threats noted above, employers should evaluate whether their panel choices reflect the current supply:

- Include fentanyl and analogs consistently in random, post-incident, and pre-employment panels.
- Expand stimulant panels and co-positivity analytics to pick up mixed-use behavior.
- Shift beyond urine where appropriate (discussed below).

### Shift Toward Long-Window Testing

Urine testing remains a staple, but its detection window remains limited; usually 1-3 days for many substances. That means intermittent use or clever timing may slip through. Long-window modalities such as hair testing extend detection to 90 days or more, providing greater visibility into patterns of use rather than one-off events. This change matters in a landscape where substances may be used infrequently or detected only in “post-accident” contexts.

### Implement Random and Post-Incident Testing, Not Just Pre-Hire

The data is clear: pre-employment screens alone are not enough in 2026. Employers should layer in random, unannounced testing, post-incident testing, and periodic “for-cause” testing to adapt to post-hire use or evolving drug supply. The seven-fold higher fentanyl positivity in random vs. pre-hire screens underscores this.

### Use Data to Drive Policy and Culture

Employers should adopt program telemetry, which includes information on which substances are testing positive, which job classes show higher rates, regional differences, and so on. By doing so, safety, HR, and supplier partners can refine the program, focus communication, and treat testing not only as policing but also as part of a broader culture of prevention.

### Communicate Clearly and Consistently

With changing substance profiles and evolving workforce expectations, communication matters. Employees want to know:

- ✓ Why we test
- ✓ What we test
- ✓ How results are used
- ✓ Resources for help if needed

Transparent communication increases trust, strengthens culture, and reduces push-back.

## Why Hair Testing Delivers Advantages in 2026



### Longer Detection Window

Hair testing typically offers a detection window of 90 days or more, a major advantage for employers dealing with intermittent or pattern-use exposure. While urine may capture use in the last few days, hair captures repeated or sustained use, which is particularly relevant when substances like fentanyl may appear sporadically or as part of polydrug regimes.



### Less Affected by Timing or Evasion

Because hair grows slowly, the timing of the sample relative to use matters less. This increases fairness and reduces the ability of individuals to “beat the test” through timing or substitution. In a marketplace where short-acting substances or episodic use may proliferate, that matters.



### Greater Deterrent Effect

Knowing that a drug-screening program monitors not just last week’s use, but last quarter’s use, strengthens deterrence. This is especially valuable when substances are widely available post-hire and pre-employment screens may not capture the risk.



**Stronger Program Defensibility**

From a legal/forensic perspective, hair testing has clear chain-of-custody protocols, scientifically validated windows, and supports defensible adverse-action processes. In a world where employers may face litigation or regulatory scrutiny over impairment or incident causation, this robustness is key.



**Complementary to Urine/Oral Fluid, Not Replacement**

To be clear: hair testing is not a wholesale replacement for urine or oral-fluid testing. Instead, it is a complementary modality that strengthens a layered approach. For instance, urine remains valuable for immediate post-incident testing, while hair provides a long window of visibility. Employers adopting hair testing gain a broader view of substance-use risk, particularly useful in a polysubstance, high-potency supply environment.

**Action Checklist for Employers**

- Review Current Panel List:** Does it include fentanyl and emerging threats?
- Refresh Policy:** Does your testing policy reflect random and post-incident testing, not just pre-employment?
- Review Modality Mix:** Are you using only urine? Should hair testing be part of the mix?
- Collect Data:** Are you tracking positivity by job class, region, industry, panel type, or mode?
- Communicate Program:** DO your employees and contractors clearly understand why you test, how you test, and what behaviors you're trying to mitigate?
- Partner With Your Laboratory/Service Provider:** Is your testing partner equipped to detect emerging drugs and provide rapid updates on supply changes?
- Audit Your Safety/Insurance Exposure:** Work with your risk manager/insurer to assess how your testing program aligns with current threats and underwriting standards.
- Prepare For Incident Response:** Have you updated your substance-use incident response, return-to-work protocol, and investigation processes in light of new substances that may complicate impairment or detection?

**Looking Ahead**

The drug-supply risk will not ease. Synthetic opioids will continue to dominate, not just fentanyl, but new analogs and psychoactive combinations. Counterfeit pills will remain a core vector for unsuspecting users. For employers, this means constant vigilance and program agility. The winners will be those who treat drug-testing programs not as static compliance checklists but as evolving risk-mitigation systems, integrated into safety, culture, HR, and insurance strategy.

Hair-based testing, paired with urine or oral fluid, informed by data analytics, and grounded in transparent employee communication, offers a powerful path forward.

**The Path Forward**

In 2026, the drug landscape for employers has become more complex and more dangerous, not just for the individuals using substances, but for workplace safety, operational risk, and insurance exposure. Fentanyl's persistence, counterfeit pills' ubiquity, and the increase in polysubstance use all challenge traditional drug-testing models. Employers who lean on outdated paradigms risk blind spots.

By updating panel scopes, adopting layered testing modalities (including hair testing), using data to inform program design, and embedding testing within a broader culture of safety and accountability, organizations can move from reactive to proactive.

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