

UCP of Sacramento and Northern California



Drug and Alcohol Prevention Policy For Safety-Sensitive Positions

Revised August 2022

1. Policy Statement

United Cerebral Palsy of Sacramento and Northern California (herein after referred to as UCP) is dedicated to provide a safe and healthy working environment to all covered team members, our clients, and the general public.

UCP recognizes that the illegal and/or excessive use of prohibited substances is not conducive to safe and healthy working conditions. It is the objective of UCP to have a work force that is free from the influence of prohibited drugs and alcohol during work hours and at all times.

2. Purpose of the Drug and Alcohol Prevention Policy

The purpose of this policy is to:

- 1) Comply with Federal Transit Administration (FTA) 49 CFR Part 655 that mandates the urine drug testing and breathalyzer alcohol testing for safety sensitive positions;
- 2) Comply with Department of Transportation (DOT) 49 CFR Part 40, as amended, that sets standards for the collection and testing of urine and breath specimens;
- 3) Prevent hiring applicants who use prohibited drugs and/or alcohol;
- 4) Deter covered team members from abusing prohibited drugs and/or alcohol misuse;
- 5) Prevent prohibited drugs and/or alcohol-related vehicle accidents by covered team members;
- 6) Provide a safe, healthy, and drug free workplace for all covered team members, our clients, and to the general public;
- 7) Uphold the sound reputation of UCP and its team members within the community and the transit industry.

3. Applicability

This drug and alcohol prevention policy applies to all covered team members of UCP, including applicants or transferees who perform, or will perform, safety-sensitive functions as defined in Part 655, section 655.4.

- See Appendix A for a list of covered safety sensitive positions by job title at UCP.

You are considered a covered team member if you perform any of the following safety-sensitive functions:

- 1) Operate a revenue service vehicle, in or out of revenue service;
- 2) Operate a non-revenue vehicle requiring a commercial driver's license (CDL);
- 3) Control movement or dispatch of a revenue service vehicle;

- 4) Perform maintenance, i.e. repairs, overhaul and rebuilding, of a revenue service vehicle or equipment used in revenue service;
 - Exemption applies only to maintenance that is contracted out.
- 5) Carry a firearm as part of the transit security.

Additionally, DOT has published 49 CFR Part 29, implementing the Drug-Free Workplace Act of 1988, which requires the establishment of drug-free workplace policies and the reporting of certain drugs-related offenses to the FTA.

- All team members of UCP are subject to the provisions of the Drug-Free Workplace Act of 1988.

4. Definitions

The Glossary of Terms, Appendix B, defines specific terms governing this drug and alcohol prevention policy and is incorporated herein.

5. Prohibited Behaviors, Drugs Use, and Alcohol Misuse

Effective immediately, the following rules represent UCP's policy concerning prohibited behaviors, the use of prohibited drugs and alcohol misuse:

- 1) The unlawful possession, manufacturing, distribution or use of any prohibited substances is inconsistent with UCP's objective of operating in a safe and efficient manner and is strictly prohibited. Accordingly, no covered team member shall engage in the unlawful possession, manufacturing, distribution or use of any prohibited drugs during working hours or at any time on UCP premises. Moreover, no covered team member shall report to work or continue to work while under the influence of any prohibited drugs. Similarly, no covered team member shall use or have in his or her possession on UCP premises any prescription medication other than medications currently prescribed by a physician for the covered team member.
- 2) Covered team members taking physician-prescribed medications which impairs his/her job performance should not report to work. Covered team members taking physician-prescribed medication which does/will not impair his/her job performance should present a statement from the prescribing physician to the Program Manager or Supervisor indicating the duration of the prescription and stating that the use of the prescription will not impair the team member's ability to perform his or her specific job duties. This policy does not require or request the prescribing physician, or the covered team member to identify the medical condition for which it is prescribed.
- 3) The use of alcoholic beverages by covered team members engaged in the operation or maintenance of UCP equipment and/or facilities is inconsistent with the objective of operating in a safe and efficient manner. Accordingly, no covered team members shall consume alcoholic beverages on UCP premises or during working hours. No alcoholic beverages shall be served at any functions without

the prior written authorization of the Chief Executive Officer/President of UCP of Sacramento and Northern California.

- 4) Lockers, desks, storage areas and vehicles are the property of UCP and must be maintained according to UCP's standards. All such areas must be kept clean and are to be used only for work-related purposes. UCP reserves the right, at all times and without notice, to have a Designated Employer Representative (DER) conduct searches and inspections of any or all covered team members' lockers and other properties for the purpose of determining if this policy has been violated.
- 5) As a condition of continued employment, covered team members must abide by this policy. As a further condition of continued employment, any covered team member who is convicted of driving under the influence of alcohol or a prohibited drug or a violation of any criminal drug statute related to the unlawful manufacture, distribution, possession, or use of controlled substances in the workplace must, within five days of occurrence, notify his or her Program Manager and/or the Director of Human Resources of the conviction.
- 6) Violations of this policy will result in disciplinary action up to, and including, the termination of employment with UCP.

Drug Prohibitions

- Use of any prohibited drugs is prohibited at all times. All covered team members are prohibited from reporting for duty, or remaining on duty, any time there is a quantifiable presence of a prohibited drug in the body above the minimum threshold specified in Appendix C. These five-panel prohibited drugs are:
 - Amphetamines (meth, speed, crank, ecstasy)
 - Marijuana (THC)
 - Cocaine (coke, crack)
 - Opiates (heroin, opium, codeine, morphine)
 - Phencyclidine (PCP)
- Be advised that under federal law, the use and possession of marijuana are illegal and does not have a legitimate medical use in the United States. Although, California has passed Proposition 64 to allow the possession and use of a certain amount of marijuana for medicinal or recreational purposes, it is not a legitimate explanation and is illegal for any UCP team members to use marijuana for any purposes. UCP shall comply with the federal law regarding the use and possession of marijuana.
- Refusal to submit to a post-accident, random, or reasonable suspicion test.

Alcohol Prohibitions

- Reporting for duty, or remaining on duty, in a position requiring the performance of safety-sensitive functions while having an alcohol concentration of .02 or greater.
- Consumption of alcohol in any form while performing safety-sensitive functions.
- Performance of any safety-sensitive function within four hours after consuming alcohol.
- Refusal to take a required alcohol test.
- Consumption of alcohol for eight hours after an accident unless the covered team member has been given a post-accident test. This applies to team members with knowledge of an accident involving a commercial motor vehicle operating on a public road in commerce for which they performed a safety-sensitive function at or near the time of the accident.
- Refusal to submit to a post-accident, random, or reasonable suspicion test.

6. Drug and Alcohol Consequences for Violations

UCP has a zero-tolerance drug and alcohol policy. The following are the consequences for violations of the policy:

- Consequences of Using Prohibited Drugs or Alcohol While Performing Safety-Sensitive Functions
A covered team member who has engaged in prohibited drugs or alcohol use during the performance of a safety-sensitive function will be immediately removed from performing safety-sensitive functions and will be subject to disciplinary action up to, and including, termination.
- Consequences of a Verified Positive Prohibited Drugs Test
Positive test results shall be confirmed by a gas chromatography-mass spectrometry (GC-MS) test. A covered team member who receives one verified positive prohibited drug test result on a DOT required test will be immediately removed from safety-sensitive functions and will be subject to disciplinary action up to, and including, termination.
- Consequences of an Alcohol Test with a Concentration Greater than .04
A covered team member who receives an alcohol test with a result indicating an alcohol concentration of .04 or greater will be immediately removed from safety-sensitive functions and will be subject to disciplinary action up to, and including, termination.
- Consequences of an Alcohol Test with a Concentration Greater than .02 but Less than .04
A covered team member who is found to have an alcohol concentration of .02 or greater but less than .04 will be immediately removed from performing safety-sensitive functions until the team member is retested with a result

below an alcohol concentration of .02, or until the start of the team member's next regularly scheduled work period, if it occurs at least eight hours following administration of the test. However, a covered team member whose test result indicates an alcohol concentration greater than .02 could be subject to disciplinary action up to, and including, termination.

- Consequences of Refusing to Submit to a Required Drug and/or Alcohol Test
A covered team member who refuses to submit to a required drug and/or alcohol test or who receives a verified adulterated or substituted drug test result determined by the MRO will be immediately removed from performing safety-sensitive functions. A refusal to submit a required test is considered a positive test result, therefore, a covered team member that refuses to submit to a required drug and/or alcohol test will be subject to disciplinary action up to, and including, termination.

7. Testing Circumstances for Prohibited Drugs and Alcohol

Prohibited drugs and alcohol testing will be conducted at a laboratory selected by UCP, which is specified in Appendix D. All covered team members and/or applicants may be subject to each of the following types of prohibited drugs and/or alcohol tests:

1) Pre-Employment Testing

All initial pre-employment testing is provided by UCP, free of charge, for all applicants. The applicant must provide his or her urine specimen at the collection site selected by UCP, which is specified in Appendix D. All initial offers of employment with UCP will be made contingent upon satisfactory completion by the applicant of a pre-employment test, pre-employment background check, and physical examination, which includes a urine drug test for the five-panel prohibited drugs. A negative pre-employment test result verified by the Medical Review Officer(s) (MRO), specified in Appendix D, and a clean background check are required prior to offering an applicant employment in a safety sensitive position.

If a pre-employment drug test is determined invalid by the MRO, it will result in the denial of employment. If a pre-employment drug test is determined cancelled by the MRO, the applicant must submit to and pass another pre-employment test, within one day, in order to be considered by UCP for employment. If the applicant does not report for a scheduled pre-employment testing, UCP might allow the applicant to reschedule another pre-employment test, however, the test must be paid for by the applicant.

No covered team member shall be permitted to perform any safety-sensitive functions, including the driving of any UCP vehicles, until he or she has received a negative test result determined by the MRO and received behind-the-wheel training.

Any team member who is transferring from a non-safety-sensitive position to a safety-sensitive position shall undergo the urine drug test prior to performing safety-sensitive functions. A verified negative, by the MRO, pre-employment test and behind-the-wheel training are required before the team member can first perform safety-sensitive functions. A verified positive pre-employment test will result in the denial of transfer to the Transportation department and/ or up to termination of employment with UCP.

If a covered team member has not performed any safety-sensitive functions for 90 or more consecutive calendar days, regardless of the reason, and has not been in the UCP's FTA random testing pool during that time, the covered team member must take and pass a pre-employment test before he or she can return to perform any safety-sensitive functions.

The pre-employment test consists of the Five-Panel prohibited drug test, which checks for a quantifiable presences of a prohibited drug in the body above the minimum threshold. The Five-Panel prohibited drugs are:

- Amphetamines (meth, speed, crank, ecstasy)
- Marijuana (THC)
- Cocaine (coke, crack)
- Opiates (heroin, opium, codeine, morphine)
- Phencyclidine (PCP)

2) Post-Accident Testing

All covered team members shall be subject to a post-accident drug and alcohol testing under the following circumstances:

- Fatal Accidents

As soon as practicable following an accident involving the loss of a human life, drug and alcohol tests will be conducted on each surviving covered team member operating the UCP vehicle at the time of the accident. In addition, any other covered team member whose performance could have contributed to the accident, as determined by UCP using the best information available at the time of the decision, will also be tested.

- Non-fatal Accidents

As soon as practicable following an accident not involving the loss of a human life, drug and alcohol tests will be conducted on each covered team member operating the UCP vehicle at the time of the accident if at least one of the following conditions is met:

- a) The accident results in injuries requiring immediate medical treatment away from the scene, unless the covered team member can be completely discounted as a contributing factor to the accident.

- b) One or more vehicles incurs disabling damage and must be towed away from the scene, unless the covered team member can be completely discounted as a contributing factor to the accident.
- c) The vehicle is a rail car, trolley car, bus, or vessel, and is removed from operation, unless the covered team member can be completely discounted as a contributing factor to the accident.

In addition, any other covered team member whose performance could have contributed to the accident, as determined by UCP using the best information available at the time of the decision, will also be tested.

When post-accident testing is required following an accident, the covered team member must remain readily available for testing or it is considered a refusal to test. The testing windows for a post-accident should not exceed eight hours for alcohol testing and 32 hours for drug testing. Within two hours of the accident, UCP will attempt to get the covered team member to a location to receive the drug and alcohol test. If UCP is not able to get the covered team member to get an alcohol test within two hours, the Designated Employer Representative (DER) will document the reason why testing is delayed and continue attempts to get the covered team member to be tested. After eight hours, attempts will cease and the two hours documentation will be updated. Any covered team member involved in an accident must refrain from alcohol use for eight hours following the accident or until he or she undergoes a post-accident alcohol test, whichever comes first. Any covered team member who leaves the scene of an accident without appropriate authorization prior to submission to drug and alcohol testing will be considered to have refused the test. However, nothing in this section shall be construed to require the delay of necessary medical attention for the injured following an accident or to prohibit a covered team member from leaving the scene of an accident for the period necessary to obtain assistance in responding to the accident or to obtain necessary emergency medical care.

UCP also reserves the right, at its own discretion, to request a non-DOT post-accident test from a covered team member in the event of an occupational injury or accident that is contributed by the team member.

The Program Manager and/or ER will ensure that post-accident information will remain confidential and maintained in a secured location. Some information will be documented on the "FTA Post-Accident Drug and Alcohol Testing Decision Making Form" and/or will be documented on the "UCP Post-Accident Test Master Log." The Program Manager and/or DER will also ensure that non-DOT and DOT testing records are stored separately in a locked cabinet and/or office.

3) Reasonable Suspicion Testing

All covered team members shall be subject to a drug and/or alcohol test when a trained Designated Employer Representative (DER) or a trained Program

Manager has reasonable suspicion to believe that a covered team member is: (1) intoxicated or under the influence of prohibited drugs or alcohol during working time, including unpaid lunch time or (2) has used prohibited drugs or alcohol on UCP's premises just before or after performing safety-sensitive functions. The covered team member must undergo an immediate physical examination, including prohibited drugs and/or alcohol testing at a testing site to determine if the covered team member is in compliance with this policy and fit to do safety-sensitive functions. The prohibited drugs and/or alcohol testing must be immediately administered at a licensed laboratory selected by UCP, as indicated in Appendix D. Immediately means that once a covered team member is directed to get reasonable suspicion testing, he or she must go get the testing done right away and cannot wait beyond one hour after the notification.

When a covered team member is directed to undergo the urine and/or breath testing because a trained DER or a trained Program Manager possesses reasonable suspicion that the covered team member is intoxicated or under the influence of prohibited drugs and/or alcohol, the covered team member shall be transported to the testing site by authorized personnel designated by UCP. If UCP directs a covered team member to undergo prohibited drug and/or alcohol testing based on a reasonable suspicion, they will be placed on administrative leave from the time of the initial testing until the results are received and reviewed by the MRO and by the DER. In the event the prohibited drug and/or alcohol test results are negative, UCP may convert the unpaid leave to paid leave.

A reasonable suspicion referral for testing can only be authorized by a trained Program Manager and/or DER, with approval from the Director of Human Resources, and only one trained personnel is required to authorize a reasonable suspicion testing but observation must be specific, contemporaneous, and articulable. Reasonable suspicion testing will be made by a trained Program Manager and/or trained DER based upon the covered team member's appearance, behavior, body odors, speech, or upon other factors constituting reasonable suspicion. The covered team member who submits to a reasonable suspicion test will be tested for the prohibited substances indicated in Appendix C. Refusal to fully cooperate in a prohibited drug and/or alcohol testing procedure, under the circumstances described in reasonable suspicion, will be deemed insubordination, will not be tolerated, and will automatically result in a positive test result.

Covered team members may be subject to reasonable suspicion drug testing anytime while on duty. Covered team members may be subject to reasonable suspicion alcohol testing while the team member is performing safety-sensitive functions, just before the team member is to perform safety-sensitive functions or just after the team member has ceased performing safety-sensitive functions.

The Program Manager and/or DER will ensure that reasonable suspicion information will remain confidential and maintained in a secured location. Information such as signs and symptoms will be documented on the "United Cerebral Palsy Transportation Reasonable Suspicion Checklist" and "United Cerebral Palsy Transportation Reasonable Suspicion Individual Test Summary."

4) Random Testing

Random drug and alcohol tests are unannounced and unpredictable, and the dates for administering random tests are reasonably spread throughout the calendar year. Random testing will continuously occur throughout the year on all days and hours during which UCP is in operation.

Testing rates will meet or exceed the minimum annual percentage rate set each year by the FTA administrator. UCP's current annual random testing rates are 25% of the number of covered team members for drugs testing and 10% of the number of covered team members for alcohol testing. UCP can establish higher testing rates to ensure compliance with the FTA annual testing rates, however, cancelled tests do not count toward meeting compliance. Moreover, UCP's random testing rates will generate no less frequently than quarterly every year.

The selection of covered team members for random drug and alcohol testing will be made by a scientifically valid method, such as a random number of table or a computer-based random number generator, and the random testing pool will be updated prior to generating selection list. Under the selection process used, each covered team member will have an equal chance of being tested each time selections are made. Moreover, an alternative will only be selected when the initially selected covered team member is not available for the entire testing period.

A covered team member may only be randomly tested for alcohol misuse while the team member is performing safety-sensitive functions, just before the team member is about to perform safety-sensitive functions, or just after the team member has ceased performing safety-sensitive functions. A covered team member may be randomly tested for prohibited drug use anytime while on duty.

Once a covered team member is notified by the DER and/or the Program Manager that he or she has been selected for random testing, the team member must immediately proceed to the collection site for testing. If the covered team member is performing a safety-sensitive function at the time of notification, the DER and/or the Program Manager shall ensure that the covered team member ceases to perform the safety-sensitive function and immediately proceeds to the collection site to get tested.

The Program Manager and/or DER will ensure that the selection list and random testing will remain confidential and that all documentation related to the selection

process is maintained in a secured location. Information will also be documented on the "UCP Random Test Master Log."

5) Return-to-Duty and/or Follow-Up Testing After a Positive Result

UCP has a zero-tolerance drug and alcohol policy and does not administer covered team members a return-to-duty or follow-up drug and/or alcohol testing.

8. Drug and Alcohol Testing Procedures

All FTA drug and alcohol testing will be conducted in accordance with 49 CFR Part 40, as amended.

Prohibited drugs and/or alcohol testing shall be conducted at a collection site and laboratory designated by UCP as indicated in Appendix D. Specimen collection, analysis and reporting shall be conducted in accordance with the procedures, outlined below, which are consistent with the federal regulations enumerated in 49 CFR Part 40 and all applicable guidance and state laws. These collection procedures are designed to protect the covered team members and the integrity of the testing processes, safeguard the validity of the test results, and ensure that those results are attributed to the correct team member.

Collector

1) The urine specimen collector at the collection site must be a DOT qualified collector.

- Collector must have basic knowledge of the DOT testing program.
- Collector must complete training and demonstrate proficiency prior to collecting urine specimen for DOT drug and/or alcohol testing.
- Collector must have refresher training at least every five years.
- Collector will undergo error correction training when fatal flaws occur within 30 days of error notification.

2) The urine specimen collector must maintain documentation of qualification in order to be a DOT qualified collector.

- Employers should periodically monitor collector's qualification documents.

Collection Site

At minimum, the collection site must have:

- A privacy enclosure for urination, of which a single toilet room is preferred.
- A water source for hand washing that should be separate from the toilet.
- No water resource accessible in the privacy enclosure (toilet tank, sink, etc.)
- No areas that can be used to conceal contaminants.
- Restricted access signs posted.

Laboratory

- 1) Laboratories that analyze DOT urine specimens must be certified by the Department of Human and Health Services (DHHS).
- 2) Laboratories are highly regulated and frequently inspected.
- 3) Laboratories must use DOT 49 CFR Part 40 procedures.
- 4) Laboratories reject specimens for testing if:
 - Insufficient urine,
 - Specimens have been damaged or tampered with,
 - Numbers of CCF and label do not match.
- 5) Laboratories must report confirmed results to an MRO and never directly to an employer.

Medical Review Officer (MRO)

- 1) MRO must be a licensed physician and have knowledge of substance abuse disorders and the testing process.
- 2) MRO must complete training, pass an exam and be certified by a nationally-recognized certification board. MRO must recertify every five years.
- 3) MRO is the gatekeeper of the DOT testing process.
- 4) MRO is the only person that can verify a test result.
- 5) MRO verified test results are the only result on record and employers cannot take action on an unverified test result.

Drug Testing Procedures

- 1) A DOT drug testing Chain of Custody Form (CCF) will be used to document the chain of custody from the time the urine specimen is collected in a collection container at the collection site, placed in a shipping container, and until it is shipped to be tested at the laboratory.
- 2) A collection kit meeting the requirements of Part 40 of the DOT regulations must be used for the drug test.
- 3) The collection of the urine specimen must be conducted in a suitable location and must contain all necessary personnel, materials, equipment, facilities, and supervision to provide for collection, security and temporary storage and transportation of the specimen to a certified laboratory.
- 4) The covered team member should have and present positive identification to the collector. The covered team member may also request positive identification of the collection site's collector.

- 5) The covered team member must provide a urine specimen in a collection container that meets the specified volume and temperature requirements (at least 45 mL between 90-100 degree Fahrenheit).
- 6) All identifying information must be entered on the CCF by the collection site personnel. The CCF will be signed by the collector, certifying that the collection was accomplished in accordance with the instructions provided. The covered team member must also sign the CCF indicating that the urine specimen was his or her own.
- 7) An aliquot urinalysis will be performed by a laboratory certified by the Department of Health and Human Services (DHHS) that has been retained by UCP. The laboratory will be required to maintain strict compliance with Federally-approved chain-of-custody procedures, quality control, maintenance, and scientific analytical methodologies.
- 8) The laboratory must report all test results directly to the UCP designated Medical Review Officer(s) (MRO), as specified in Appendix D. The MRO is responsible for reviewing and interpreting all confirmed positive, adulterated, substituted, or invalid drug test results. The MRO must determine whether alternative medical explanations could account for the test results. If there is a positive, adulterated, substituted, or invalid drug test, the MRO must notify the UCP designated employer representative(s) of the result.
- 9) A covered team member who receives a positive, adulterated, or substituted drug test result has up to 72 hours to request the test of the split urine specimen (which is provided at the time of original collection). If the covered team member requests the testing of the split, the MRO must direct (in writing) the lab to provide the split urine specimen to another certified laboratory for analysis. However, the covered team member will pay for the testing of the split urine specimen.

Alcohol Testing Procedures

Alcohol testing may be conducted by a qualified Screening Test Technician (STT) or Breath Alcohol Technician (BAT) at the alcohol testing site. STTs are only permitted to conduct the first test given to a covered team member by using either a breath or saliva test (Alcohol Screening Test). A BAT is authorized to conduct a screening drug test, but, unlike an STT, is also authorized to conduct the second test given to a covered team member whose test result is .02 or above (alcohol confirmation test). For a screening drug test, the STT or BAT may use an approved Alcohol Screening Device (ASD) or Evidential Breath Testing device (EBT). For an alcohol confirmation test, the BAT is required to use an EBT.

Alcohol Screening Tests

- 1) The DOT Alcohol Testing Form (ATF) will be used to document the results of an alcohol screening test.

- 2) The testing will be performed in a private setting. Only authorized personnel will have access and are the only individuals who can see or hear the test results.
- 3) The covered team member should have and present positive identification to the STT or BAT at the test site. The covered team member may also request positive identification of the STT or BAT.
- 4) When an ASD is used, the STT or BAT must check the device's expiration date and show it to the covered team member. A device may not be used after its expiration date.
- 5) The STT or BAT will, in front of the covered team member, open an individually wrapped or sealed package containing the device. The team member will be asked to place the device in his/her mouth and use it in the manner described by the device's manufacturer.
- 6) The covered team member must work with the STT or BAT to perform the test, which includes the insertion of the device's mouth piece into the team member's mouth and the exhalation (breathing out) must be performed in the manner described by the device's manufacturer.
- 7) The STT or BAT should wear single-use examination gloves and must change the gloves following each test.
- 8) When the device is removed from the covered team member's mouth, the STT or BAT must follow the manufacturer's instructions to ensure the device is activated.
- 9) If the procedures listed above cannot be successfully completed, the device must be discarded and a new test must be conducted using a new device. The covered team member will be offered the choice of using the new device or having the STT or BAT use a new device for the test.
- 10) If the new test cannot be successfully completed, the covered team member will be directed to immediately take a screening test using an EBT.
- 11) When an EBT is used, the mouthpiece of the breath testing device must be sealed before use and opened in the covered team member's presence. The mouthpiece is then inserted into the breath testing device.
- 12) The covered team member must forcefully blow into the mouthpiece of the testing device for at least six seconds or until an adequate amount of breath has been obtained.
- 13) Once the test is completed, the BAT must show the covered team member the results.
- 14) The result displayed on the device must be read within 15 minutes of the test. The STT or BAT must show the covered team member the device and its reading and enter the result on the ATF.
- 15) If the reading on the ASD or EBT is less than .02, both the covered team member and the STT or BAT must sign and date the result form. The form will

then be confidentially forwarded to a UCP DER and no further testing is authorized.

- 16) If the reading on the ASD or EBT is .02 or more, an alcohol confirmation test must be performed.

Alcohol Confirmation Tests

- 1) If the result of the alcohol screening test is an alcohol concentration of .02 or greater, an alcohol confirmation test will be performed. If a different BAT conducts the confirmation test, the BAT who conducts the alcohol screening test will complete and sign Step 3 of the ATF. The BAT will provide the covered team member with Copy 2 of the form.
- 2) In the presence of the covered team member, the BAT will conduct an "air blank" to ensure that the device is working correctly. The BAT must show the reading to the covered team member. The air blank result must be .00. If the reading is greater than .00, the BAT will conduct one more air blank. If the reading is greater than .00, testing will not proceed using the instrument. However, testing may proceed on another instrument.
- 3) The BAT will instruct the covered team member to not eat, drink, put any object or substance in his or her mouth, and, to the extent possible, not belch during a waiting period before the confirmation test. This time period begins with the completion of the screening test and will not be less than 15 minutes. The BAT will explain to the covered team member the reason for this requirement (e.g. to prevent any accumulation of mouth alcohol leading to an artificially high reading) and the fact that it is for the employee's benefit. The BAT will also explain that the test will be conducted at the end of the waiting period. If the covered team member disregards the instruction, the BAT will so note in the "Remarks" section of the ATF.
- 4) If a BAT other than the one who conducted the alcohol screening test is conducting the alcohol confirmation test, the new BAT will initiate a new breath alcohol testing form. The BAT will complete Step 1 on the form. The covered team member will then complete Step 2 on the form, signing the certification. Refusal by the covered team member to sign this certification will be regarded as a refusal to take the test. The BAT will note in the "Remarks" section of the form that a different BAT conducted the screening process.
- 5) If the covered team member does not sign the certification in Step 4 of the form, it will not be considered a refusal to be tested. In this event, the BAT will note the failure to sign in the "Remarks" section of the form.
- 6) A breath alcohol test is invalid under the following circumstances:
 - The EBT does not pass its next external calibration check (invalidates all test results of 0.02 or greater on tests conducted since the last valid external calibration test); this does not invalidate negative tests.
 - The BAT does not observe the minimum 15-minute waiting period prior to the confirmation test.

- The BAT does not perform an air blank on the EBT before a confirmation test or such an air blank does not result in a reading of .00.
- The BAT does not sign the form.
- An EBT fails to print a confirmation test result.
- The sequential test number or alcohol concentration displayed on the EBT is not the same as the sequential test number or alcohol concentration on the printed result.

Dilute Urine Specimen

If there is a negative dilute test results, UCP will conduct one additional retest. The result of the second test will be the test of record.

Dilute negative results with a creatinine level greater than or equal to 2 mg/dL, but less than or equal to 5 mg/dL, requires immediate recollection under direct observation.

Split Specimen Test

In the event of a verified positive test result, or a verified adulterated or substituted result, the covered team member can request that the split specimen be tested at a second laboratory. UCP guarantees that the split specimen test will be conducted in a timely fashion. However, UCP holds the right to decide whether the covered team member will be required to pay for the split specimen test.

Direct Observation Collection

1) Observing donor prior to collection of urine specimen:

- Observer must be the same gender as the donor and can be the collector, if both are the same gender.
- Observer must have the donor lift his or her upper-body clothing to mid-chest, lower his or her lower-body clothing to mid-thigh and completely turn around to reveal that the donor is not concealing a device intended to thwart the drug test.
- Donor may return his or her clothing to its natural position.

2) Observed collection of urine specimen:

- Observer must watch the donor's urine leave the body and enter the collection container.
- If observer is not also the collector, the observer is instructed by the collector on how to observe the donor and the collector finishes the collection process after the urine specimen is collected.

9. Refusal to Submit to a Prohibited Drug and/ or Alcohol Test

Covered team members are considered to have refused to take a prohibited drugs and/or alcohol test if they:

Prohibited Drugs Test

- 1) Fail to appear at a collection site for any test (except a pre-employment test) within a reasonable time, as determined by UCP, consistent with applicable DOT agency regulations, after being directed to do so by the trained Program Manager or a trained DER;
- 2) Fail to remain at the collection site until the testing process is complete. A team member who leaves the collection site before the testing process commences for a pre-employment test is not deemed to have refused to test;
- 3) Fail to provide a urine specimen. A team member who does not provide a urine specimen because he or she has left the collection site before the testing process commenced for a pre-employment test has not refused to test.
- 4) Fail to permit a monitored or observed collection if UCP ordered or if the collector required the collection to be monitored or observed;
- 5) Fail to provide a sufficient amount of urine specimen, provided the MRO finds there was no medical reason for the covered team member to provide insufficient amount of urine;
- 6) Fail or decline to take an additional drug test that UCP or the collector has directed;
- 7) Fail to undergo a medical examination or evaluation as directed by the MRO or UCP's DER;
- 8) Fail to cooperate with any part of the urine specimen collection process;
- 9) Fail, for an observed collection, to follow the instructions to raise and lower clothing and turn around;
- 10) Possession of or wearing a prosthetic or other device that could be used to tamper with the collection process if the covered team member is found to have or wear a prosthetic or other device designed to carry clean urine or a urine substitute;
- 11) Admittance to the collector or MRO to having adulterated or substituted the urine specimen;
- 12) Fail to remain readily following an accident.

Alcohol Test

- 1) Fail to appear at an alcohol collection site for any test within a reasonable time, as determined by UCP, consistent with applicable DOT agency regulations, after being directed to do so by a trained DER or a trained Program Manager;

- 2) Fail to remain at the alcohol collection site until the testing process is complete;
- 3) Fail to provide an adequate amount of saliva or breath;
- 4) Fail to provide a sufficient breath specimen, provided the physician finds that there was no medical reason for the covered team member to provide an insufficient amount of breath;
- 5) Fail to undergo a medical examination or evaluation as UCP has directed as part of the insufficient breath procedures;
- 6) Fail to sign the certification statement at Step 2 of the Alcohol Testing Form (ATF);
- 7) Fail to cooperate with any part of the testing process;
- 8) Fail to remain readily following an accident.

As a covered team member, if the MRO reports that you have a verified adulterated or substituted test result, you have refused to take a drug test.

As a covered team member, if you refuse to take a drug and/or alcohol test, you incur the same consequences as testing positive and will be immediately removed from performing safety-sensitive functions, and will be subject to disciplinary action up to, and including, termination.

10. Contact Person(s)

For questions about the UCP Drug and Alcohol Prevention Policy for Safety Sensitive Positions, contact UCP's Designated Employer Representative(s) (DER):

Jim Kaiser, Transportation Division Manager
2501 Florin Road.
Sacramento, CA 95822
(916) 394-5296

Brandee Tracy, Assistant Manager
2501 Florin Road.
Sacramento, CA 95822
(916) 330-1416

Michael Williams, Director of Human Resources
4350 Auburn Blvd.
Sacramento, CA 95841
(916) 283-8325

Heather Shimamoto, Human Resources Generalist
4350 Auburn Blvd.
Sacramento, CA 95841
(916) 283-8319

UCP Designated Employer Representative(s) roles:

- 1) The DER is the point of contact for the testing program for UCP.
- 2) The DER receives test results and communicates with collectors, MRO(s), and other vendors.
- 3) The DER manages the random testing pool.
- 4) The DER maintains the testing record with confidentiality.
- 5) The DER has the authority to remove a team member from safety-sensitive duties after receiving MRO verified positive drug test results and confirmed alcohol test results.
- 6) The DER collects and maintains:
 - Policy dissemination;
 - Education and training;
 - Post-accident and Reasonable Suspicion testing decisions.
- 7) The DER reviews UCP's copies of the CCFs for errors and corrects errors when found.

There are additional DER(s) who are designated by the Program Managers of Transportation department to help assist with certain tasks such investigations and inspections and reasonable suspicion decision makings regarding this drug and alcohol prevention policy. These DER(s) are:

- Program Coordinator
- Program Supervisor
- Operations Assistant
- Transportation Assistant Manager

11. Confidential Recordkeeping

All of the prohibited drug and alcohol testing records of covered team members are considered confidential. For the purpose of this policy, confidential recordkeeping is defined as records maintained in a secured manner, within locked cabinet and/or office, accessible, only by key, to the DER(s) and/or the Program Manager of Transportation. Non-DOT and DOT testing records are stored separately in a locked cabinet and/or office. Moreover, drug and alcohol records are stored separately from personnel records in a locked cabinet and/or office. UCP acknowledges that records may be stored electronically, provided that they can be printed for compliance monitoring and auditing.

Testing records to be maintained by UCP are:

- 1) Documentation of reason for testing (e.g. post-accident decision form, random list, etc.)

- 2) Testing notification form;
- 3) Employer copy of Federal CCF (for drugs test);
- 4) MRO verified test results;
- 5) Employer copy of DOT and ATF (for alcohol test);

Covered team member alcohol and prohibited drug test records will only be released in the following situations:

- 1) To the active covered team member, upon his or her request;
- 2) Upon written consent by the covered team member authorizing the release to a specified individual;
- 3) Upon request of a DOT agency with regulatory authority over UCP;
- 4) Upon request of state or local officials with regulatory authority over UCP;
- 5) Upon request of the United States Secretary of Transportation;
- 6) Upon request by the National Transportation Safety Board (NTSB) as part of an accident investigation;
- 7) In a lawsuit, grievance, or other proceeding when legally applicable;
- 8) Upon request by subsequent employers upon receipt of a written request by a covered team member.

12. Education and Training

The FTA Drug and Alcohol Testing Regulation 49 CFR Parts 655.14 indicates that employers are required to provide education and training for covered team members on prohibited drugs and alcohol awareness. UCP has established a covered education and training program for drug and alcohol that includes:

- 1) Education, which display and distribute informational material to all covered team members; and
- 2) Training for:
 - Covered team members, which includes at least 60 minutes of training on the effects and consequences of prohibited drug use and on the signs and symptoms which may indicate prohibited drug use; and
 - Team members who received training must sign and date the “Acknowledge of Prohibited Drug Awareness Training for Safety Sensitive Positions” form to be kept on file.
 - Program Managers, Supervisors, and/or other personnel authorized by UCP to make reasonable suspicion determinations, which includes at least 60 minutes of training on the physical, behavioral, and performance indicators of probable prohibited drugs use, and a least 60 minutes of training on the physical, behavioral, speech, and performance indicators of probable alcohol misuse.

- DER(s), Managers, or Supervisors who received training must sign and date the “Acknowledge of Reasonable Suspicion Training for Supervisors” form to be kept on file.

Information on Prohibited Drug use and Alcohol Abuse

Prohibited drugs use and alcohol abuse can have a serious impact on anyone. They could negatively impact a person’s health, work, personal life and the lives of others. The following information should assist a person in identifying individuals at risk and establishing a track to recovery for those that use prohibited drugs or abuse alcohol.

Effects of Prohibited Drugs and Alcohol on a Person’s Health, Work and Personal Life

The following represent some of the potential effects that drug and alcohol use may have on the user:

1) Workplace

- May cause the team member to feel capable of handling tasks that are too much or too dangerous;
- May cause lateness and absenteeism, increasing the workload of others;
- May cause crime on the job, including theft of UCP and personal property;
- May cause major errors in the work performed, risking harm to yourself, other team members, clients, and the general public.

2) Health

- Neurological problems including dementia, anxiety and suicide;
- Cardiovascular problems including hypertension;
- Increased cancer risk;
- Liver diseases including alcoholic hepatitis and cirrhosis ;
- Sexual dysfunction.

3) Personal life

- Alcohol can also destroy relationships, lead to serious problems; with the law (e.g., drunk driving), and even cause harm to the people you love;
- Drinking can affects work life and it can leads to job loss and all of the financial problems that would follow.

Signs and Symptoms of a prohibited drug and/or alcohol problem

Any one or more of the following signs may indicate a drug and/or alcohol problem:

- 1) Appears fearful, anxious, or paranoid for no reason;

- 2) Blackouts or the inability to remember what has happened;
- 3) Cold, sweaty palms and/or shaking hands;
- 4) Lack of motivation;
- 5) Appears lethargic or “spaced out;”
- 6) Pattern of absenteeism with vague excuses;
- 7) Red and watery eyes;
- 8) Pupils larger or smaller than usual;
- 9) Blank stare;
- 10) Regular (or daily) use or consumption;
- 11) Secretive or suspicious behavior;
- 12) Sudden mood swings,
- 13) Irritability or angry outbursts;
- 14) Unexplained need for money;
- 15) Stealing money or items.

13. Closing

This drug and alcohol prevention policy has been instituted in order to assure the maximum safety and well-being of all covered team members, our clients, the general public, and other UCP personnel. All covered team members who receive a copy of this policy must read, understand, and agree to abide by it; sign and date the “Acknowledgement of Team Member” form. Your assistance and cooperation toward the achievement of this goal is vitally important.

APPENDIX A

Safety-Sensitive Positions

The following are job titles for the safety-sensitive positions at UCP of Sacramento and Northern California's Transportation department:

- Transportation Division Manager
- Transportation Dispatcher
- Transportation Assistant Manager
- Transportation Program Supervisors
- Transportation Program Coordinators
- Transportation Operation Assistant
- Transportation CDL Driver
- Transportation CDL Driver 2
- Transportation CDL Driver 3
- Vehicle Service Attendant
- Class C Driver
- Class C Driver 2
- Class C Driver 3
- Direct Support Professional (DSP)/Drivers
 - Some Direct Support Professionals hold CDLs and operate UCP vehicles occasionally, so they are subject to the random FTA drug and alcohol testing.

APPENDIX B

Glossary of Terms

UCP of Sacramento and Northern California (UCP) recognize the terms listed in this section to have the following meanings:

Adulterated urine specimen. A urine specimen that has been altered, as evidenced by test results showing either a substance that is not a normal constituent for that type of specimen or showing an abnormal concentration of an endogenous substance.

Alcohol. The intoxicating agent in beverage alcohol, ethyl alcohol, or other low molecular weight alcohols, including methyl or isopropyl alcohol.

Alcohol concentration. The alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by a breath test.

Alcohol confirmation test. A subsequent test using an Evidential Breath Testing (EBT) device, following a screening test with a result of 0.02 or greater, that provides quantitative data about the alcohol concentration.

Alcohol screening test. An analytic procedure to determine whether a team member may have a prohibited concentration of alcohol in a breath or saliva specimen.

Alcohol testing site. A place selected by UCP where team members present themselves for the purpose of providing breath or saliva for an alcohol test.

Alcohol use. The drinking or swallowing of any beverage, liquid mixture, or preparation, including any medication containing alcohol.

Aliquot. A fractional part of a specimen used for testing. It is taken as a sample representing the whole specimen.

Applicants. People who are seeking employments with UCP.

Breath Alcohol Technician (BAT). A qualified person who instructs and assists team members in the alcohol testing process and operates an evidential breath testing device.

Cancelled test. A drug or alcohol test that has a problem identified that cannot be or has not been corrected, or which 49 CFR Part 40 otherwise requires to be cancelled. A cancelled test is neither a positive nor a negative test.

Chain of custody. The procedure used to document the handling of the urine specimen from the time the team member gives the specimen to the collector until the specimen is destroyed. This procedure uses the Federal Drug Testing Custody and Control Form (CCF).

Covered team member. An active team member of UCP, who are subject to the terms and conditions of this Drug and Alcohol Prevention Policy. The “Acknowledgement of Team Member” of this Drug and Alcohol Prevention Policy shall be signed and dated as an indication that the covered team member is subject to the policy.

Collection container. A container into which the team member urinates to provide the specimen for a drug test.

Collection site. A place selected by UCP where team members present themselves for the purpose of providing a urine specimen for a drug test.

Collector. A qualified person who instructs and assists team members at a collection site, who receives and makes an initial inspection of the specimen provided by those team members, and who initiates and completes the Federal Drug Testing Custody and Control Form (CCF).

Confirmed drug test. A confirmation test result received by a Medical Review Officer from a laboratory.

Department of Transportation (DOT). This term encompasses all DOT agencies, including, but not limited to, the United States Coast Guard (USCG), the Federal Aviation Administration (FAA), the Federal Railroad Administration (FRA), the Federal Motor Carrier Safety Administration (FMCSA), the Federal Transit Administration (FTA), the National Highway Traffic Safety Administration (NHTSA), the Pipeline and Hazardous Materials Safety Administration (PHMSA), and the Office of the Secretary (OST). These terms include any designee of a DOT agency.

Designated employer representative (DER). A team member authorized by UCP to take immediate action(s) to remove covered team members from safety-sensitive duties, or cause covered team members to be removed from covered duties, and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for UCP, consistent with the requirements of 49 CFR Parts 40 and 655.

DHHS. The Department of Health and Human Services or any designee of the Secretary of Department of Health and Human Services.

Dilute urine specimen. A urine specimen with creatinine and specific gravity values that are lower than expected for human urine.

Employer. A person or entity employing one or more team members (including an individual who is self-employed) subject to DOT agency regulations requiring compliance with 49 CFR Parts 40. The term includes an employer's officers, representatives, and management personnel.

Evidential Breath Testing Device (EBT). A device approved by NHTSA for the evidential testing of breath at the .02 and .04 alcohol concentrations, placed on NHTSA's Conforming

Products List (CPL) for “Evidential Breath Measurement Devices” and identified on the CPL as conforming to the model specifications available from NHTSA's Traffic Safety Program.

Federal Transit Administration (FTA). An agency of the U.S. Department of Transportation.

Invalid drug test. The result reported by an HHS-certified laboratory in accordance with the criteria established by HHS Mandatory Guidelines when a positive, negative, adulterated, or substituted result cannot be established for a specific drug or specimen validity test.

Laboratory. Any U.S. laboratory certified by the Department of Health and Human Services (HHS) under the National Laboratory Certification Program as meeting the minimum standards of Subpart C of the HHS Mandatory Guidelines for Federal Workplace Drug Testing Programs; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under this part.

Medical Review Officer (MRO). A person who is a licensed physician and who is responsible for receiving and reviewing laboratory results generated by an employer's drug testing program and evaluating medical explanations for certain drug test results.

Negative test result. The result reported by a HHS-certified laboratory to an MRO when a specimen contains no drug or the concentration of the drug is less than the cutoff concentration for the drug or drug class and the specimen is a valid specimen.

Positive test result. The result reported by an HHS-certified laboratory to a MRO when a specimen contains a drug or drug metabolite equal to or greater than the cutoff concentrations.

Post-accident test. A prohibited substance test administered to a team member when a motor vehicle accident has occurred and the team member performed a function which contributed to the accident.

Pre-employment test. A prohibited substance test administered to an applicant or a team member who is being considered for a safety-sensitive position. The applicant or team member must be informed of the purpose of the test prior to the actual event.

Program Manager. The person that is designated by UCP to be in charge of a program, e.g. Transportation and its daily operation i.e. the Transportation Division Manager.

Prohibited drugs. The drugs for which tests are required under the requirement of 49 CFR Parts 40 and DOT agency regulations are marijuana, cocaine, amphetamines, phencyclidine (PCP), and opiates.

Prohibited substances: Under this policy, prohibited substances shall be used synonymous to drug abuse and/or alcohol misuse and refers to the definition of the foregoing terms “Alcohol” and “Prohibited Drugs.”

Random test. A prohibited substance test given annually to a predetermined percentage of team members who perform safety-sensitive functions and who are selected on a scientifically-defensible random and unannounced basis.

Reasonable suspicion test. A prohibited substance test given to an active team member who is reasonably suspected by a trained manager, supervisor, and/or designee of using prohibited drug or misusing alcohol.

Reconfirmed. The result reported for a split specimen when the second laboratory is able to corroborate the original result reported for the primary specimen.

Return to duty test. A prohibited substance and/or alcohol test prior to return to duty given to eligible team member who previously tested positive for prohibited drugs and/or alcohol.

Safety-sensitive positions. Job positions that perform safety sensitive functions for UCP.

Safety-sensitive functions. Functions shall include: (1) All time spent at a distributor warehouse, other property, or on any public property, waiting to be dispatched, unless the team member has been relieved from duty by his or her supervisor; (2) All time spent inspecting, servicing, or conditioning any motor vehicle at any time; (3) All time spent at the driving controls of a motor vehicle in operation; (4) All time, other than driving time, in or upon any motor vehicle; (5) All time loading or unloading a vehicle, supervising, or assisting in the loading or unloading, attending a vehicle being loaded or unloaded, remaining in readiness to operate the vehicle, or in giving or receiving receipts for shipments loaded or unloaded; and (6) All time fueling, repairing, obtaining assistance, or remaining in attendance upon a disabled vehicle. (7) Remove those functions that may not apply and include all others that do.

Screening Drug Test (also known as initial drug test). The test used to differentiate a negative specimen from one that requires further testing for drugs or drug metabolites.

Screening Test Technician (STT). A qualified person who instructs and assists team member in the alcohol testing process and operates an ASD.

Shipping container. A container that is used for transporting and protecting urine specimen bottles and associated documents from the collection site to the laboratory.

Split urine specimen test. In drug testing, a part of the urine specimen that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the employee requests that it be tested following a verified positive test of the primary specimen or a verified adulterated or substituted test result.

Substituted specimen. A urine specimen with creatinine and specific gravity values that are so diminished or so divergent that they are not consistent with normal human urine.

Team Member. Any person who is employed by UCP. The term includes individuals currently performing safety-sensitive functions designated in DOT agency regulations and applicants for employment subject to pre-employment testing and those individuals that does not perform any safety-sensitive functions.

Transferees: Team members with non-safety sensitive positions that are transferring to safety-sensitive positions.

Verified test. A drug test result or validity testing result from an HHS-certified laboratory that has undergone review and final determination by the MRO.

APPENDIX C

Cutoff levels for Tested Prohibited Drugs

The Department of Transportation establishes the minimum threshold levels for each of the five prohibited drugs test that will be given to an applicant or team member that is in a safety-sensitive position. Positive test results for the listed prohibited drugs at or above the cutoff levels indicated will be considered unacceptable. All cutoff concentrations are expressed in nanograms per milliliter (ng/mL) and the current cutoff levels are as follows:

Initial test analyte	Initial test cutoff ¹	Confirmatory test analyte	Confirmatory test cutoff concentration
Marijuana metabolites (THCA) ²	50 ng/mL ³	THCA	15 ng/mL.
Cocaine metabolite (Benzoylecgonine)	150 ng/mL ³	Benzoylecgonine	100 ng/mL.
Codeine/ Morphine	2000 ng/mL	Codeine Morphine	2000 ng/mL. 2000 ng/mL.
Hydrocodone/ Hydromorphone	300 ng/mL	Hydrocodone Hydromorphone	100 ng/mL. 100 ng/mL.
Oxycodone/ Oxymorphone	100 ng/mL	Oxycodone Oxymorphone	100 ng/mL. 100 ng/mL.
6-Acetylmorphine	10 ng/mL	6-Acetylmorphine	10 ng/mL.
Phencyclidine	25 ng/mL	Phencyclidine	25 ng/mL.
Amphetamine/ Methamphetamine	500 ng/mL	Amphetamine Methamphetamine	250 ng/mL. 250 ng/mL.
MDMA ⁴ /MDA ⁵	500 ng/mL	MDMA MDA	250 ng/mL. 250 ng/mL.

¹For grouped analytes (i.e., two or more analytes that are in the same drug class and have the same initial test cutoff):

Immunoassay: The test must be calibrated with one analyte from the group identified as the target analyte. The cross-reactivity of the immunoassay to the other analyte(s) within the group must be 80 percent or greater; if not, separate immunoassays must be used for the analytes within the group.

Alternate technology: Either one analyte or all analytes from the group must be used for calibration, depending on the technology. At least one analyte within the group must have a concentration equal to or greater than the initial test cutoff or, alternatively, the sum of the analytes present (i.e., equal to or greater than the laboratory's validated limit of quantification) must be equal to or greater than the initial test cutoff.

²An immunoassay must be calibrated with the target analyte, Δ -9-tetrahydrocannabinol-9-carboxylic acid (THCA).

³Alternate technology (THCA and Benzoylecgonine): When using an alternate technology initial test for the specific target analytes of THCA and Benzoylecgonine, the laboratory must use the same cutoff for the initial and confirmatory tests (i.e., 15 ng/mL for THCA and 100ng/mL for Benzoylecgonine).

⁴Methylenedioxymethamphetamine (MDMA).

⁵Methylenedioxyamphetamine (MDA).

(a) Laboratories, must use the cutoff concentrations displayed in the above table for initial and confirmatory drug tests. All cutoff concentrations are expressed in nanograms per milliliter (ng/mL).

(b) On an initial drug test, you must report a result below the cutoff concentration as negative. If the result is at or above the cutoff concentration, you must conduct a confirmation test.

(c) On a confirmation drug test, you must report a result below the cutoff concentration as negative and a result at or above the cutoff concentration as confirmed positive.

(d) You must report quantitative values for morphine or codeine at 15,000 ng/mL or above.

APPENDIX D

Medical Review Services

Collection Site:

Comprehensive Medical Inc.
3600 Power Inn Rd, STE G
Sacramento, CA 95826
Phone: (916) 454-1423
Fax: (916) 454- 2764
Protocol: lindaheath.cmi@gmail.com
Or

Comprehensive Medical Inc.
6000 Fairway Drive, Ste. 3,
Rocklin, CA 95677
Phone: (916) 315- 0100
Fax: (916) 315- 0200
Protocol: lindaheath.cmi@gmail.com

Laboratory:

MedTox Scientific Laboratories, Inc.
402 W. County Road, STE D
St. Paul, Minnesota 55112
Phone: (800) 832-3244

Medical Review Officer(s):

Dana Carasig, MD-MRO
546 Franklin Ave.
Massapequa, NY 11758
Phone: (800) 526-9341

Neil J. Dash, MD- Chief MRO
546 Franklin Ave.
Massapequa, NY 11758
Phone: (800) 526-9341

