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| SUBSTANCE USE TESTING POLICY |
| Covering Applicants and Employees Working in Maine |



Maine Department of Labor

Bureau of Labor Standards

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**Table of Contents**

Definitions 3

Contact Information 5

Scope of Testing 6

Substances to Be Tested 7

Probable Cause Testing 8

Random Testing 8

Arbitrary Testing 8

Consequences of Testing 9

Testing Procedures 10

Collection Facility 10

Point of Collection Testing 10

Sample Collection 11

Sample Storage 12

Chain of Custody 12

Testing Laboratory 13

Applicant/Employee Notification 13

Appeal Process 14

Description of Rehabilitation Services 15

Appeal Form 16

Appendix A 17

Policy Submission Checklist 18

Policy Submission Process 18

**DEFINITIONS**

**Applicant** – any person seeking employment from an employer. The term includes any person using an employment agency’s services.

**Arbitrary** – the frequency of testing and the selection of those being tested is based on a set event, such as an employment anniversary, promotion, etc. Arbitrary testing can only be conducted on employees whose job is of a nature that could pose a potential threat to the health or safety of the public or co-workers if the employee were under the influence of an intoxicating or impairing substance. Arbitrary testing events also include:

1. Client-required or site-specific: testing based on criteria unrelated to substance use such as when a client requires testing prior to work on a project or specific site.

**Employee** – A person, who is permitted, required or directed by any employer to engage in any employment for consideration of direct gain or profit. A person separated from employment while receiving a mandated benefit, including but not limited to Workers’ Compensation, Unemployment Compensation and Family Medical Leave, is an employee for the period the person receives the benefit and for a minimum of 30 days beyond the termination of the benefit. A person separated from employment while receiving a non-mandated benefit is an employee for a minimum of 30 days beyond the separation.

1. A full-time employee is an employee who customarily works 30 hours or more each week.

**Employer** – any person, partnership, corporation, association or other legal entity, public or private, that employs one or more employees. The term also includes an employment agency.

**Negative test result** – a test result that indicates:

1. A tested-for substance is not present in the tested sample; or
2. A tested-for substance is present in the tested sample in a concentration below the cutoff level.

**Non-Impairment Agreement** – a written document that states an employee will not report to work when impaired; this includes medical marijuana or prescription medications.

**Non-negative test result** – a test result that indicates the presence of a tested-for substance in the tested sample above the cutoff level of the test.

**Point-of-collection Test (POCT)** – means an initial screening test performed at the site where the sample is collected using a non‑instrumented testing device approved for that purpose by the federal Food and Drug Administration.

1. The collection of any sample for use in a substance test must be conducted in a medical facility and supervised by a licensed physician or nurse.
2. No employer may administer directly any substance test to any of its employees.

**Positive test result** – a test result that indicates the presence of a tested-for substance in the tested sample above the cutoff level of the test.

1. Confirmed positive test means a confirmation test result that indicates the presence of a tested-for substance above the cutoff level.

**Probable Cause** – means a reasonable ground for belief in the existence of facts that induce a person to believe that an employee may be under the influence of an intoxicating substance, provided that the existence of probable cause may not be based exclusively on any of the following:

1. Information received from an anonymous informant;
2. Any information tending to indicate that an employee may have possessed or used a tested-for substance off duty, except when the employee is observed possessing or ingesting any intoxicating substance either while on the employer’s premises or in the proximity of the employer’s premises during or immediately before the employee’s working hours; or
3. A single work-related accident.

**Random** – a method of selecting those to be tested where all employees in the testing pool have an equal probability of selection by chance. ***Employers with more than 50 full-time employees may test all of their employees using random selection; otherwise, only safety-sensitive employees will be tested.***

**Return to Work Agreement** – a written document that sets forth the expectations that the employer and the employee assistance/medical professional have of the employee who has completed mandated treatment for alcohol and/or drug problems. It also sets forth the consequences if the agreed upon expectations are not met. This agreement should be used if an employee has violated the drug-free workplace policy and/or has been provided the opportunity to participate in treatment as a condition of continued or re-employment.

**Safety-sensitive task or occupation** – a work task or an employee occupation that based on its nature, machinery used, location, surroundings, or its influence upon other operations or individuals could potentially pose a threat to the safety of a worker, a co-worker, customers or others.

Substance test – means any test procedure designed to take and analyze body fluids or materials from the body for the purpose of detecting the presence of specific substances. The term does not include tests designed to determine blood-alcohol concentration levels from a sample of an individual's breath, so-called breathalyzer tests.

1. "*Screening test*" means an initial substance test performed through the use of immunoassay technology or a federally recognized substance use test, or a test technology of similar or greater accuracy and reliability approved by the Maine Department of Health and Human Services under rules adopted under section 687, and that is used as a preliminary step in detecting the presence of specific substances.
	1. A screening test of an applicant's urine or saliva may be performed at the point-of-collection through the use of a non-instrumented, point-of-collection test device approved by the federal Food and Drug Administration.

b. "*Confirmation test*" means a second substance test that is used to verify the presence of a specific substance indicated by an initial, positive, screening- test result and is a federally recognized substance test or is performed through the use of liquid or gas chromatography-mass spectrometry.

c. "*Federally recognized substance test*" means any substance test recognized by the federal Food and Drug Administration as accurate and reliable through the administration's clearance or approval process.

**Contact Information**

**COVERED ESTABLISHMENT**

Company name: Click here to enter text.

Street address: Click here to enter text.

Mailing address: Click here to enter text.

Phone number: Click here to enter text.

**Substance use testing policy contact**

Contact name*:* Click here to enter text.

Contact title: Click here to enter text.

Contact phone number: Click here to enter text.

Contact email: Click here to enter text.

Annual Survey Contact info (if different from company policy contact): Click here to enter text.

**Locations Covered**

Location 1: Click here to enter text.

Location 2: Click here to enter text.

Location 3: Click here to enter text.

Other Locations as needed: Click here to enter text.

* Applicants will be notified at the time of initial application that they may be tested for substance use. Prior to testing, an applicant as defined in this policy shall be provided with a copy of the policy.
* All employees will be provided a copy of the approved policy at least 30 days before any portion of the policy applicable to employees takes effect. All new employees will be given a copy of the approved policy prior to or upon beginning work.
* All applicants and employees can review the Maine Substance Use Testing Law here:

<http://www.mainelegislature.org/legis/statutes/26/title26sec681.html>

I certify that this policy complies with the Maine Substance Use Testing Law (26 M.R.S.A. Sec. 681-690) and the Maine Department of Labor Rules relating to Substance Use Testing (adopted October 27, 1989).

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signature of Authorized Company Official Date

**SCOPE OF TESTING**

**Applicant Testing**

An **applicant** is defined by this program and state law as any person seeking employment from an employer. For the purpose of this program, an applicant will not be any person separated from employment by this employer while receiving a mandated benefit from or on account of this employer, including but not limited to Workers’ Compensation, Unemployment Compensation and Family Medical Leave and for a period of 30 days beyond the termination of the benefit, nor will an applicant be any person separated from employment by this employer while receiving a non-mandated benefit from or on account of this employer for a period of 30 days beyond the separation.

*Classifications or position titles to be tested (may be all):* **Click here to enter text.**

Substance tests will be administered only to those applicants who are in the above classification or position titles who have been offered employment with the Company or who have been offered a position by the Company on a roster of eligibility from which applicants shall be selected for employment.

**Advisory note: Consider adding the following statements or removing entire section. “Employment with The Company is/is not conditional upon passing the applicant drug screen. The Company has put notice of this on its employment application and in the employee handbook/employment policies.”**

**Employee Testing**

An **employee** is defined in state law as "a person who is permitted, required or directed by any employer to engage in any employment for consideration of direct gain or profit." For the purpose of this program, a person separated from employment while receiving a mandated benefit, including but not limited to Worker’s Compensation, Unemployment Compensation and Family Medical Leave, is an employee for the period the person receives the benefit and for a minimum of 30 days beyond the termination of the benefit. A person separated from employment while receiving a non-mandated benefit is an employee for a minimum of 30 days beyond the separation.

*Classifications or position titles to be tested (may be all* – *see definitions for specific criteria for Random or Arbitrary testing):* **Click here to enter text.**

*For safety-sensitive positions, enter general description of the jobs to be covered and justification for why they are considered safety-sensitive:* **Click here to enter text.**

**Use of Prescription Medications and/or Medical Marijuana in the Workplace**

**Click here to enter text. Enter company’s statement on the use of prescriptions and medical marijuana in the workplace – if you choose not to address this topic: delete the section. NOTE: This statement should be specific to potential consequences for use of substances at work / on Company property and should be consistent with any employment policies currently used, including any employee handbooks.**

**SCREENING AND CONFIRMATION TESTS**

* All screening tests will be conducted using the *Enzyme Multiplied Immunoassay Test* (EMIT).
* All confirmation tests will be conducted using the *Gas Chromatography/Mass Spectrometry* (GC/MS) methodology.
* Applicants and employees will be tested for use of the indicated substances.
* All screening and confirmation levels must be at or above the levels listed in **Appendix A** of this policy.

**SPECIMEN COLLECTION TYPE TO BE USED: choose all that apply**

[ ]  Urine

[ ]  Oral fluids/saliva

[ ]  Hair follicle [ ]  Breath alcohol

[ ]  Sweat patch

**SUBSTANCES TO BE TESTED FOR: choose all that apply**

[ ]  Amphetamine/Methamphetamine/MDMA

 MDA/MDEA

[ ]  Cocaine and/or metabolites

[ ]  Marijuana and/or metabolites

[ ]  Opiates and/or metabolites

[ ]  Phencyclidine

[ ]  Barbiturates

[ ]  Benzodiazepines

[ ]  Methadone

[ ]  Methaqualone

[ ]  6-Acetylmorphine (heroin)

[ ]  Alcohol

**EMPLOYEE TESTING TYPES TO BE CONDUCTED**

**This company conducts the following types of testing:** Choose all that apply

[ ]  **Probable Cause/Reasonable Suspicion** – Probable cause means a reasonable ground for belief in the existence of facts that induce a person to believe an employee may be under the influence of an intoxicating substance, provided that the existence of probable cause may **NOT** be based exclusively on any of the following:

* 1. Information received from an anonymous informant.
	2. Any information tending to indicate that an employee may have possessed or used a tested-for substance off duty, except when the employee is observed possessing or ingesting any tested-for substances either while on the premises or in the proximity of the employer premises during or immediately before the employee’s working hours.
	3. Single work-related accident.

Classifications or position titles that may make a determination of probable cause: **Click here to enter text.**

Method by which probable cause determination will be communicated to the employee (*employer must state, in writing, the facts upon which this determination is based and provide a copy to the employee prior to testing*): **Click here to enter text.**

Click here to enter text. Enter details on how the employee being tested under probable cause will get to the testing facility and/or to their home. (Ex. taxi, another employee, etc.)

[ ]  **Random** –Random means a method of selecting those to be tested where all potential testees have an equal probability of selection by chance. *Employers with more than 50 full-time employees may test* all *of their employees using random selection; otherwise, only safety-sensitive employees will be tested.*

Random selection process: **Click here to enter text.**

Random testing frequency and population (*e.g. 10% of employees will be tested every six months*): **Click here to enter text.**

[ ]  **Arbitrary** –Arbitrary means that the frequency of the testing and the selection of those being tested is based on a set event, such as an employment anniversary, promotion, or if it is a requirement to retain a contract, etc. Arbitrary testing can only be conducted on employees whose job is of a nature that would create an unreasonable threat to the health or safety of the public or co-workers if the employee were under the influence of an intoxicating or impairing substance (i.e., safety-sensitive position).

Arbitrary testing frequency (*based on event such as an anniversary, or when testing is required to retain a contract, etc.*): **Click here to enter text.**

**CONSEQUENCES OF TESTING**

1. Action to be taken for refusal to submit to a test

An **applicant** will not be hired.

An **employee** who refuses to submit to a drug screening test may be terminated.

2. Action to be taken while awaiting results of a test

An **applicant** will not be hired.

During the period between testing and the receipt of the test results, an **employee** may be suspended with full pay and benefits (*employee may be allowed to work while awaiting results or may have a change in assignment without a loss of pay or benefits).*

3. Action to be taken based on initial confirmed positive result

An **applicant** will not be hired.

An **employee** will be offered an opportunity for up to six months of rehabilitation/treatment services.

4. Action to be taken upon refusal of employee to use rehabilitation and/or treatment resources

Employee may be terminated.

5. Procedures for returning employee to the previously held job or position after rehabilitation/treatment

Upon successfully completed rehabilitation/treatment as determined by the provider after consulting with the Company, the employee is entitled to return to his/her previously held job with full pay and benefits unless conditions unrelated to the employee’s previous confirmed positive result make the employee’s return impossible.

No reduction may be made in an employee’s previous benefits or rate of pay while waiting reassignment to work or while working in a position other than the previous job.

The employee shall be reinstated to the previous position or another position with the equivalent rate of pay and benefits and with no loss of seniority within six months after returning to work in any capacity with the employer, unless the employee has received a subsequent confirmed-positive test result within that time, or unless conditions unrelated to the employee’s previous confirmed positive test makes reinstatement or reassignment impossible.

6. Action to be taken based on any subsequent confirmed positive test results

Employee may be terminated.

7. Action to be taken on employee’s voluntary admission

An employee who voluntarily admits a problem with substances of abuse may take advantage of the services offered through the company’s health insurance or the Employee Assistance Program (see Rehabilitation Service), if available. No adverse action will be taken against an employee simply because of such admission.

**TESTING PROCEDURES**

1. Sample Collection Facility or Facilities

**Enter the Names and Addresses of your Collection Facility or Facilities**

2. Point-of-collection Testing (POCT) being used: YES [ ]  NO [ ]

The POCT is an initial screen test performed at the point-of-collection (POC)/collection site through the use of a non-instrumented, POC testing device approved by the federal Food and Drug Administration. This type of testing can be used for urine or oral fluids sample collection. The POCT procedures outlined in this policy do not replace or supersede any other drug-testing policies or requirements.

POCT is a process that has been put into place in order to complement the existing drug-testing procedures; it is screening conducted at the point-of-collection site rather than a laboratory in order to determine the presence of tested-for substances (see list of substances to be tested).

No employer may directly administer any substance test to its employees.

In order to ensure confidentiality of applicants and employees during the POCT process, testing will take place offsite at the collection site or within a medical facility/first aid station on-site, supervised by either a licensed doctor or nurse. Tests must be conducted by individuals who are trained in the POCT process for the sample type and collection devices used, following approved Chain-of-Custody procedures. Staff who will perform POCT will be instructed in the proper manner of collecting samples, reading results and maintaining a proper chain of custody. At a minimum, the training will consist of the following:

**Precautions** – Specific storage information for the POCT testing device that will be utilized.

**The Testing Procedure** – Sample collection, sample integrity, understanding the temperature strip and instructions for use.

**Determination of Drug Screen Result** – Negative results, non-negative results, and invalid results.

**Negative Result Procedure** – Notify the donor of the result and offer that he/she may observe the disposal of the sample collected, cup and POCT testing device.

**Non-negative Result Procedure** – Requires proper Chain-of-Custody procedures. The sample must remain in the donor's site until the tamper evident tape is applied to the sample and the donor has completed the donor information and donor affidavit on the chain of custody form.

**Invalid results** – Must be re-tested with a fresh POCT testing device; provided that if the applicant or employee is found to have twice substituted, adulterated, diluted or otherwise tampered with the sample, the applicant or employee shall be deemed to have refused to submit to a substance test.

**Collection Problems and Collector Response** – Procedures to follow for refusal to test, urine does not meet temperature requirements, shy-bladder process, and/or suspected specimen tampering

Any sample that results in a negative test will be destroyed. Any sample that results in a positive result will be sent to the approved laboratory following approved Chain-of-Custody procedures for confirmation testing as described in Section 5 of the Policy.

3. Sample Collection

**A. Procedure to segregate a portion of the sample at applicant’s/employee’s request:**

At the request of the applicant/employee, at the time the test sample is taken, a portion of the sample collected, sealed, and labeled according to State regulations and these procedures, will be segregated for that applicant’s/employee’s own testing. This sample will be stored by the laboratory and chain of custody shall be maintained as provided in this policy.

Within five days after notice of the test result is given to the tested person, the applicant/employee shall notify the employer and the facility of the testing laboratory selected for the applicant’s/employee’s own testing. The laboratory so-selected must be licensed by the Maine Department of Health and Human Services. The employer’s laboratory shall promptly send the segregated portion of the specimen to the selected laboratory, subject to the same Chain-of-Custody and security requirements as observed for the employer’s specimen.

The applicant/employee will be required to pay for the segregation of a second sample, as well as the expense of said additional testing, only if and when the applicant/employee notifies the employer that the applicant/employee actually wishes the test to be made and the applicant/employee notifies the employer of the choice of laboratory to which the second sample is to be sent.

**B. Collection Procedure**

The employer will not require an applicant/employee to remove any clothing for the purpose of collecting a urine sample, except that the employer will require that an applicant/employee leave any personal belongings other than clothing and any unnecessary coat, jacket or similar outer garments outside the collection area.

No applicant/employee may be required to provide a urine sample while being observed, directly or indirectly, by another individual.

If the collector believes the applicant/employee to have substituted, adulterated, diluted or otherwise tampered with the sample, the specimen will be rejected, and the applicant/employee will be given an opportunity to provide a second specimen. For urine samples, the applicant/employee will remain under observation at the medical facility and may be given liquids until the second specimen is provided.

If the second specimen fails to meet any assessment standard, the applicant/employee is considered to have refused testing.

**C. Employee’s election of a blood test (not applicable to applicants)**

For an alcohol or marijuana test, the employee may request that a blood sample be taken for testing. The employee must make this request at the time a test sample is taken. If the employee requests a blood test, no other sample from the employee will be tested for alcohol or marijuana. However, the employee may be required to provide a urine sample for testing of other drugs.

**D. Procedure to collect blood**

Blood specimens (upon request by the employee for alcohol or marijuana) shall be collected in new vacuum-activated blood collection tubes, with such preservatives as may be specified by the testing laboratory, and shall be sealed with tamperproof seals, covering the cap and extending over the sides of the container.

Blood samples shall be taken by a licensed physician, registered physician’s assistant, registered nurse, or a person in a position qualified to draw blood. Each specimen container shall be clearly and indelibly labeled with the date and time of collection and the name or other identifier associated with the employee from whom the specimen was obtained. Sealing and labeling shall occur under the observation of the employee being tested.

4. Sample Storage

**A. At collection point**

Samples will be collected in new, clean containers manufactured for the purpose of urine collection or whichever sample type is collected. Immediately after assessment, the container will be sealed with tamper-proof tape and labeled in the presence of the applicant/employee. The seal will cover the cap and extend over the sides of the container. The label will contain the date and time of collection, and the identifying number of the applicant/employee.

All information on the label will be written clearly and with indelible ink. Samples will be transported or shipped promptly to the testing laboratory in a secure fashion, so as to prevent tampering. If shipment or transport is not feasible, the specimen shall be refrigerated within one hour, at less than 6°C for no more than three days, or frozen at -20°C or less, for no more than two weeks before shipment.

**B. At laboratory**

All positive specimens will be retained by the laboratory in the original containers in secure storage at freezing temperatures (-20°C or less) for at least 12 months. Should legal challenge occur, the specimen will be retained throughout the period of resolution of that challenge.

5. Chain of Custody

**A. Labeling and Packaging**

Immediately upon collection of each sample, a Chain-of-Custody record will be established for that sample, indicating the identity of each person having control over the sample and the times and dates of all transfers or other actions pertaining to the sample.

**B. Transport**

Samples will be picked up from the facility within 24 hours of collecting the sample and will be transported in a secure fashion, so as to avoid tampering. Each person who takes custody of the sample in the course of transport will record on the Chain-of-Custody log the date, time, transporter’s name and employer’s name, origin and destination of the sample.

**C. At laboratory**

When a sample arrives at the lab, the person receiving the sample shall record the time of receipt and the location of each sample in the lab’s storage system. Any technician or other person who removes the sample from storage or opens the sample shall record the date, time, his or her name and purpose for removal or opening of the sample.

6. Identify Testing Laboratory

**Choose your Testing Laboratory from the drop-down list.**

7. Procedure to Notify Applicant/Employee

The applicant/employee will be notified by personal telephone call and confirmed by mail unless the applicant/employee otherwise instructs. All laboratory reports, including the screening, confirmation and quality control data shall be reviewed and in the event of a confirmed positive, the applicant/employee will have an opportunity to speak with a healthcare professional in order to validate the reason for the positive result (i.e. a valid prescription) prior to the final report being sent to the employer. The final report will be sent to **Title of employer representative to receive report.**

The report will identify the name of the laboratory, the drugs and metabolites tested for, whether the test results were negative or confirmed positive and the cutoff levels for each substance. The report will include any available information concerning the margin of accuracy and precision of the test methods employed.

1. Unless agreed upon by the applicant/employee, no report shall show the quantity of substance detected, but only the presence or absence of that substance relative to the cutoff level.
2. No report will show that a substance was detected in a screening test, unless the presence of the substance was confirmed in the confirmatory test. Test results will be randomly delayed from two to five days so that the employer cannot gauge screening test results from the time results are reported. In addition, all testing will be billed to the employer at a single rate per sample tested (which may be periodically adjusted by the laboratory).
3. No substance may be reported as present if the employer did not request analysis for that substance.
4. Reports of samples segregated at the applicant’s/employee’s request for testing by the applicant’s/employee’s choice of laboratory, will be provided to the applicant/employee and the employer.

Unless the applicant/employee consents, all test results and any information acquired by the employer in the testing process is confidential and may not be released to anyone except the applicant/employee tested.

This requirement applies to the personnel of all laboratories involved and to the employer. However, this does not prevent the disclosure of results or information if:

* 1. Release of information is required or permitted by state and federal law including release under 26 M.R.S.A. Sec. 683 (8) (D), or
	2. The use of this information is part of any grievance procedure, administrative hearing or civil action relating to the imposition of the test or the use of test results. The results of any test may not be required, requested or suggested by the employer to be used in any criminal proceeding as provided by 26 M.R.S.A. Sec. 685 (3) (B).
1. The laboratory shall retain records of confirmed positive results in a numerical or quantitative form for at least two years.

8. Procedure to Appeal

If the applicant/employee chose to segregate a portion of their sample and elects to submit that sample to a laboratory of their choice, the results of the second test will be controlling. To appeal the results of a confirmed positive result in lieu of testing the segregated sample, the applicant/employee must fill out and sign the attached "Substance Use Test Appeal" form, submitting information explaining or contesting the results, within five (5) working days after notice of a confirmed-positive test result.

The appeal process will be conducted without cost to the applicant/employee. The applicant/employee will then be scheduled to meet within 14 days with **list title(s) of person(s) who will review the appeal**. The applicant/employee will explain the basis for the appeal and may be asked questions. After the meeting concludes, a written report of findings and conclusions will be prepared, and a copy sent to the applicant/employee.

**DESCRIPTION OF REHABILITATION SERVICES**

**This company has an Employee Assistance Program:**

**[ ]  YES**

**[ ]  NO**

1. Employee Assistance Program

The Employee Assistance Program, certified under the State’s Department of Health and Human Services “Regulations for Employee Assistance Programs for Employers Operating in the State of Maine,” provides a range of services to employees to address substance abuse. A copy of the DHHS approval, description of the program and explanation of how to obtain services is attached. *(Be sure to attach this information).*

2. Other rehabilitation and/or treatment services

If there are other rehabilitation/treatment services available, a description on how to obtain the services should be provided here. If there are none, it should be noted.

3. Procedure to obtain services

To take advantage of the Employee Assistance Program, an employee may directly call the Employee Assistance Program or may ask for a referral through the Company. The telephone number for the EAP program is **provide telephone number**and the website is**provide website, if applicable.**

4.Description of method of payment for rehabilitation and/or treatment services (for first time positives only)

**(If company has over 20 full-time employees)***:* If an employee elects to use the services provided under the Company's Employee Assistance Program, the cost will be covered by the Company. If any employee elects to use another rehabilitation program, some of those costs may be covered by the employee's health insurance. To the extent that costs may not be covered by health insurance, the additional costs are divided equally between the Company and the employee. If necessary, the employer shall assist in financing the cost share of the employee through a payroll deduction plan.

**(If 20 or fewer full-time employees):**  Except to the extent that costs are covered by a health insurance plan, the employee shall be responsible for the payment of any public or private rehabilitation program.

5. Testing upon return to work after completion of rehabilitation/treatment

The employee may be required to submit to one subsequent substance test at any time between 90 days and one year from the date of the employee's prior test.

**SUBSTANCE USE TEST APPEAL FORM**

If you have reason to question the accuracy of a substance test to which you have submitted, you may file an appeal by filling out this form.

Name of person appealing: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Date sample provided: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Where was sample provided? \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What are the reasons for your appeal of the test's accuracy? (please be specific)

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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 Signature of Person Appealing

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**will schedule a time to meet with you within14 days from the time this Appeal is received by the employer.

**APPENDIX A**

**DRUG SCREENING AND CONFIRMATION LEVELS**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Substances** | **Urine (ng/mL except in alcohol)** | **Oral Fluids (ng/mL)** | **Hair Follicle (pg/mg)** | **Sweat Patch (ng/patch)** |
|  | *Screen* | *Confirm* | *Screen* | *Confirm* | *Screen* | *Confirm* | *Screen* | *Confirm* |
| 6-Acetylmorphine (heroin) | Only if morphine >2000 ng/mL[[1]](#footnote-1) | 10 ng/mL | N/A | 4 ng/mL | N/A | 200 pg/mg[[2]](#footnote-2) | N/A | N/A |
| Alcohol[[3]](#footnote-3) | 0.02 g/100mL | 0.02 g/100mL | N/A | N/A | N/A | N/A | N/A | N/A |
| Amphetamine/ Methamphetamine MDMA | 500 ng/mL | 250 ng/mL | 50 ng/mL | 50 ng/mL[[4]](#footnote-4) | 500 pg/mg | 300 pg/mg[[5]](#footnote-5) | 25 ng/patch | 25 ng/patch |
| Barbiturates | 300 ng/mL | 300 ng/mL | N/A | N/A | N/A | N/A | N/A | N/A |
| Benzodiazepines | 300 ng/mL | 200 ng/mL | N/A | N/A | N/A | N/A | N/A | N/A |
| Cocaine and/or metabolites | 150 ng/mL | 100 ng/mL | 20 ng/mL | 8 ng/mL | 500 pg/mg | Cocaine, 500 pg/mg metabolite 50 pg/mg[[6]](#footnote-6) | 25 ng/patch | 25 ng/patch |
| Marijuana and/or metabolites[[7]](#footnote-7) | 50 ng/mL | 15 ng/mL | 4 ng/mL  | 2 ng/mL | 1 pg/mg | 0.05 pg/mg[[8]](#footnote-8) | 4 ng/patch | 1 ng/patch |
| Methadone | 300 ng/mL | 300 ng/mL | N/A | N/A | N/A | N/A | N/A | N/A |
| Methaqualone | 300 ng/mL | 300 ng/mL | N/A | N/A | N/A | N/A | N/A | N/A |
| Opiates and/or metabolites (codeine and morphine) | 2000 ng/mL | 2000 ng/mL | 40 ng/mL | 40 ng/mL | 200 pg/mg | 200 pg/mg | 25 ng/patch | 25 ng/patch |
| Phencyclidine | 25 ng/mL | 25 ng/mL | 10 ng/mL | 10 ng/mL | 300 pg/mg | 300 pg/mg | 20 ng/patch | 20 ng/patch |
| MDA | N/A | 250 ng/mL | N/A | 300 pg/mg | N/A | 300 pg/mg | N/A | 25 ng/patch |
| MDEA | N/A | 250 ng/mL | N/A | 300 pg/mg | N/A | 300 pg/mg | N/A | 25 ng/patch |

Policy Submission Checklist

* Is there a description of the method used by the employer in consulting with the employees as to the development of this policy? This can be part of the submission letter.
* Is there a description of the method used by the employer to notify the employees of the submission of the plan to the Maine Department of Labor and for the employees to comment to the department, including:
	+ Description of method used to notify employees of the submission
	+ How and where employees may access the policy
	+ The time limit for employees to submit written comments to the Maine Department of Labor. (Must be at least 10 days)
	+ Maine Department of Labor address (below).
* Are copies of forms, information sheets or other materials used by applicants/employees relating to substance testing included?

\*\*\*Policy Submission Process

To submit the policy to the Maine Department of Labor, please send a copy of:

* A written Substance Use Testing Policy with Page 5 signed by an authorized company official certifying that the policy complies with all applicable statutes and regulations.
* Blank samples of any and all forms, information sheets, or other materials used by employees relating to the substance testing program.
* A copy of the Employee Assistance Program (EAP) certificate from DHHS, if applicable.
* A copy of the training certificate or curriculum used for POCT training, if applicable.
* A copy of the training certificate or curriculum used for training supervisors in Impairment Detection (for Probable Cause determinations), if applicable.

To:

Maine Department of Labor

Bureau of Labor Standards

45 State House Station

Augusta, ME 04333

OR via email:

mdol@maine.gov

1. Only tested if morphine is present at a concentration of at least 2000 ng/mL. [↑](#footnote-ref-1)
2. Must also contain amphetamine at a concentration greater than or equal to 50 pg/mg. [↑](#footnote-ref-2)
3. Alcohol blood test confirmation level: 0.02 g/100mL. (**employee request only**) [↑](#footnote-ref-3)
4. Specimen must also contain amphetamine at the screening concentration. [↑](#footnote-ref-4)
5. Methamphetamine sample must also contain amphetamine at a concentration of at least 50 pg/mg. [↑](#footnote-ref-5)
6. Cocaine concentration at confirmatory cutoff AND Benzoylecgonine/cocaine ratio is at least 0.05 OR a Cocaethylene concentration of at least 50 pg/mg OR a narcocaine concentration of at least 50 pg/mg. [↑](#footnote-ref-6)
7. Marijuana and/or metabolites blood test confirmation level: 10 ng/mL. (**employee request only**) [↑](#footnote-ref-7)
8. Delta-9-tetrahydrocannabinol-9-carboxylic acid. [↑](#footnote-ref-8)