



Marathon Petroleum Company Alcohol Misuse and Controlled Substance Abuse Prevention Plan

Employee Guide

Department of Transportation Pipeline and Hazardous Materials Safety Administration

Revised as of January 1, 2018

The Prevention Plan contained herein sets forth the requirements of 49 CFR Part 199 and 40. Areas of the Plan that appear in bold and underlined print reflect the Company's independent Drug and Alcohol Policy. This Plan applies to all DOT regulated employees of Marathon Petroleum Company LP, Marathon Petroleum Logistics Services, Catlettsburg Refining LLC, Galveston Bay Refining Company, and/or their majority owned subsidiaries.



Alcohol Misuse and Controlled Substance Abuse Prevention Plan



Table of Contents

A. Summary.....	1
B. General.....	2
C. Circumstances That Require Testing	8
D. Breath Alcohol Testing Procedures	12
E. Controlled Substance Testing Procedures	13
F. Employee Records	14
G. Consequences for Violating the Plan.....	15
H. Levels of Disciplinary Actions.....	15
I. Intervening When a Controlled Substance or Alcohol Problem is Suspected, Including Confrontation, Referral Program, and/or Referral to Management	16
J. Effects of Controlled Substance and Alcohol Misuse on an Individual’s Health, Work, and Personal Life.....	17
K. Signs and Symptoms of Alcohol Misuse	18
L. Signs and Symptoms of a Controlled Substance Problem.....	18
M. Employee Assistance Program (EAP)	19
N. Training	19
O. Contractor Monitoring	20
Acknowledgment and Receipt Notification	21

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



A. Summary

1. The Pipeline and Hazardous Materials Safety Administration (PHMSA) of the U.S. Department of Transportation (DOT), prohibits certain conduct by, and requires alcohol and controlled substance abuse testing of, persons who perform specified covered functions. Persons who violate these regulations will be subject to consequences, including removal from covered functions. In addition, the Company has established its own Drug and Alcohol Policy that includes provisions beyond those required by PHMSA which appear in bold and underlined print.
2. The Company has a long standing commitment to maintain the highest standards for employee safety and health and to help prevent accidents and injuries resulting from the misuse of alcohol and controlled substances by employees who perform covered functions.

The Company must comply with all PHMSA regulations and other DOT regulations which require affirmative actions to eliminate the impact of the misuse of alcohol and controlled substances in the workplace. The purpose of the Alcohol Misuse and Controlled Substance Abuse Prevention Plan is to reduce accidents that result from the misuse of alcohol and controlled substances, thereby reducing fatalities, injuries and property damage.

3. This *Employee Guide* is a summary of the actual plan.
 - a. The full Plan text governs, should there be any discrepancies between it and this summary. Contact your supervisor or Human Resources Consultant should you wish to review the actual Plan.
 - b. The Plan supplements the Company's Drug and Alcohol Policy which contains additional provisions that also apply and govern your employment with the Company.
 - c. The Plan may be amended, terminated or changed at any time at the sole discretion of the Company and/or as required by law. Whenever this occurs, the affected portions of the Plan are specifically superseded.
 - d. This summary and the Plan text are only informational and under no circumstances are they to be construed as creating or constituting a contract of employment, nor shall they be construed as limiting any action the Company may desire to take in administering the employee-employer relationship.
4. A copy of this *Employee Guide* will be distributed to each covered employee and to each person subsequently hired for or transferred to a covered position. Each employee will be required to sign an Acknowledgement Form to document they received an *Employee Guide*.
5. Written notice of the availability of this information is provided to representatives of employee organizations, relevant unions, and their business agents.
6. Materials supplied to covered employees will also include information on additional Company mandated policies with respect to the use or possession of alcohol and controlled substances, including any consequences for an employee found to have a specified alcohol level, that are based on the Company's authority independent of the federal regulations.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



B. General

1. A copy of the entire Plan is available through the Human Resources office.
2. The local Human Resources office is the contact for all employees. The Corporate Controlled Substance and Alcohol Program Manager is:

Name: Jaime De La Cruz
Address: 539 South Main Street
Findlay, OH 45840
Phone Number: (419) 421-3148

This Manager shall be responsible for the preparation of an alcohol and controlled substance misuse plan which complies with requirements of the DOT regulations. In addition the Manager shall be responsible for providing oversight and evaluation on the Plan and for providing guidance and counseling to operating components who will be responsible for administering all aspects of the plan for covered employees. The Company shall ensure that all covered employees are notified and aware of the provisions and coverage of the Company's Plan and are knowledgeable of the requirements of the Plan. Information regarding maintenance of testing records per DOT regulations is available in the Plan.

3. The Company's Medical Review Officer (MRO) is:

Name: Dr. Scott Rioch
Address: 539 South Main Street
Findlay, OH 45840
Phone Number: (419) 421-2027

The MRO is responsible for all duties assigned by the DOT and PHMSA regulations. This will include, but is not limited to: retention of all controlled substance test results; the review and interpretation of confirmed positive results; discussion and conference with employees testing positive; and the review of any particular rehabilitation that may be involved.

The Medical Director's office is responsible for all covered employee testing in accordance with the regulations. The Medical Director's office has developed a computer program that randomly selects individuals every month in compliance with PHMSA Random Testing regulations and to ensure that employees are only in one DOT random testing pool. Procedures for random selection have been distributed to all field locations. The Medical Director's office is also responsible for administering the blind testing quality control program.

Medication Reporting — Per the Company's Drug and Alcohol Policy, an employee who needs to use prescription or non-prescription medication which may impair their judgment or performance or otherwise adversely affect the normal functions of their mental faculties or physical abilities is responsible for notifying the Health Services Department.

4. Controlled substance specimen analysis will be performed by:

Lab Corp. Laboratories, Inc. (for DOT Urinalysis)
P.O. Box 12652
3308 Chapel Hill/Nelson Highway
Research Triangle Park, NC 27709

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



**Psychemedics Corp. (for non-DOT Hair Analysis)
5832 Uplander Way
Culver City, CA 90230**

5. Categories of Employees Subject to Testing:

Persons performing PHMSA regulated functions for the Company are subject to DOT/PHMSA alcohol and controlled substance testing. A complete list of positions classified by the Company as covered are listed in the Plan. "Covered functions" are defined as operating, maintenance or emergency-response duties involving a pipeline or LNG facility regulated by PHMSA 49 CFR Parts 192 and 195. This does not include clerical, truck driving, accounting, or other functions not subject to those Parts. The person may be employed by the operator, be a contractor engaged by the operator, or be employed by such a contractor. Title 49 CFR Part 40 specifies procedures which must be followed by the Company when conducting alcohol and controlled substance testing pursuant to regulations issued by agencies of the Department of Transportation.

6. Functions and Period of the Work Day Covered by the Plan:

- a. All employees performing covered functions are subject to alcohol testing and must refrain from consuming any alcohol (not just alcoholic beverages) whenever they are performing, ready to perform, immediately available to perform, or within four hours of being scheduled to perform (unless in an emergency) these covered functions. **Company Policy also prohibits consumption and/or possession of unsealed alcohol at any time during the work day. In its discretion, management may prohibit the possession of all alcohol on Company premises at designated locations.**
- b. All employees are prohibited from performing covered functions with detectable levels of controlled substances in their system. All employees performing covered functions are subject to controlled substance testing. **Company Policy also prohibits possession and/or consumption of controlled substances at any time during the work day.**
- c. Employees will only be tested for alcohol and controlled substances while they are at work. If they are called to work and have consumed alcohol within the four-hour time frame, they would have to decline to report until four hours have passed with no alcohol consumption. An exception to this rule is that if the employee is called to duty to respond to an emergency, the employee can report to work, but cannot consume alcohol after being notified to report. In this case, the employee must advise the supervisor that he has consumed alcohol within the preceding four hours and the supervisor must determine whether the employee should still report.

7. Definitions

- a. Accident — Accident means an incident reportable under Part 195 which is required for each failure in a pipeline system subject to this part in which there is a release of the hazardous liquid or carbon dioxide transported resulting in any of the following.
 - (1) Explosion of fire not intentionally set by the operator;
 - (2) Release of 5 gallons (19 liters) or more of hazardous liquid or carbon dioxide except that no report is required for a release of less than 5 barrels (0.8 cubic meters) resulting from a pipeline maintenance activity if the release is:

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- (a) Not otherwise reportable under this section;
 - (b) Not one described in §195.52(a)(4);
(Resulted in pollution of any stream, river, lake, reservoir, or other similar body of water that violated applicable water quality standards, caused a discoloration of the surface of the water or adjoining shoreline, or deposited a sludge or emulsion beneath the surface of the water or upon adjoining shorelines);
 - (c) Confined to Company property or pipeline right-of-way; and
 - (d) Cleaned up promptly;
- (3) Death of any person;
 - (4) Personal injury necessitating hospitalization;
 - (5) Estimated property damage, including cost of clean-up and recovery, value of lost product, and damage to the property of the operator or others, or both, exceeding \$50,000.”

49CFR Part 191.3 — “Incident means any of the following events:

- (1) An event that involves a release of gas from a pipeline or of liquefied natural gas, liquefied petroleum gas, refrigerant gas, or gas from an LNG facility, and that results in one or more of the following consequences:
 - (a) A death, or personal injury necessitating in-patient hospitalization;
 - (b) Estimated property damage of \$50,000 or more including loss to the operator and others, or both, but excluding cost of gas lost;
 - (c) Unintentional estimated gas loss of three million cubic feet or more;
 - (2) An event that results in an emergency shutdown of an LNG facility. Activation of an emergency shutdown system for reasons other than an actual emergency does not constitute an incident;
 - (3) An event that is significant, in the judgment of the operator, even though it did not meet the criteria of paragraphs (1) or (2) of this definition.”
- b. Air Blank — a reading by an evidential breath testing device (E.T.) of ambient air containing no alcohol.
 - c. Alcohol — the intoxicating agent in beverage alcohol, ethyl alcohol or other low molecular weight alcohols including methyl or isopropyl alcohol.
 - d. Alcohol Concentration — the alcohol in a volume of breath expressed in terms of grams of alcohol per 210 liters of breath as indicated by an evidential breath test conducted under the federal regulations.
 - e. Alcohol Use — the consumption of any beverage, mixture, or preparation, including any medication, containing alcohol.
 - f. Breath Alcohol Technician (BAT) — an individual who instructs and assists individuals in the alcohol testing process and operates in E.T.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- g. Canceled or Invalid Test — a test that is deemed to be invalid as listed in Appendix C of the AMPP.
- h. Confirmation Test (alcohol) — a second test following a screening test with a result of 0.02 or greater, that provides quantitative data of alcohol concentration.
- i. Confirmation Test (controlled substance) — a test using the gas chromatography/mass spectrometry technique performed to confirm or deny the presence of a controlled substance or metabolite in a urine **or hair** sample.
- j. Controlled Substance — any of the following drugs: Cocaine, Marijuana, Opioids, Amphetamines, and Phencyclidine. **The Company defines a controlled substance as any substance, other than an Authorized Substance, which is, or has the effect on the human body of being, a narcotic, depressant, stimulant, hallucinogen or cannabinoid, their precursors, derivatives or analogues, and includes, but is not limited to, those substances scheduled as controlled substances pursuant to the Federal Controlled Substances Act, inhalants, “designer drugs,” “look-a-likes,” and hemp products or products derived from hemp.**
- k. Covered Employee — any person who performs an operating, maintenance, or emergency response function on a pipeline facility regulated by Parts 192 or 195. As applied in the regulations, “employee” and “applicant for employment” have the same meaning for the purpose of these requirements. Covered employee and “individual” or “individual to be tested” have the same meaning for the purposes of the alcohol regulations. Clerical, truck driving, accounting, or other job functions not covered by Part 195 are not subject to the regulations. Such person may be employed directly by the Company, or by a contractor engaged by the Company.
- l. Covered Function (safety-sensitive function) — an operation, maintenance, or emergency-response function that is performed on a pipeline or pipeline facility and the function is regulated by Part 195.
- m. Designated Employer Representative (DER) — Any representative of the employee’s Human Resources group and/or any representative of the Health Services organization.
- n. EBT or (evidential breath testing device) — an EBT approved by the National Highway Traffic Safety Administration (NHTSA) for the evidential testing of breath and placed on NHTSA’s “Conforming Products List” (CPL) of evidential breath measurement devices.
- o. Operator — an owner or operator of pipeline facilities.
- p. Performing (a covered function) — an employee is considered to be performing a covered function (safety-sensitive function) during any period in which he/she is actually performing, ready to perform, or immediately available to perform such covered functions.
- q. Pipeline — all parts of the physical facilities through which product moves in transportation. This includes pipe, valves, and other appurtenances attached to pipe, compressor units, metering stations, delivery stations, holders, and fabricated assemblies.
- r. Pipeline Facilities — new and existing pipeline, rights-of-way, and any equipment, facility, or building used in the transportation of product.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- s. Refusal to Submit (to an alcohol test) — a covered employee fails to provide adequate breath for testing without a valid medical explanation after he or she has received notice of the requirement to be tested in accordance with the provisions of Part 199, or engages in conduct that clearly obstructs the testing process.
- t. Refusal to Submit (to a urine test) — Failure to provide an adequate amount of urine for testing without a valid medical explanation after he or she received notice of the requirement to be tested in accordance with the provisions of Part 199, or refusal to comply with the collection process.
- u. **Refusal to Cooperate — Employees who refuse to sign a consent form or refuse to consent to a search and/or laboratory testing will be discharged. Employees involved in conduct or actions that are considered an effort to undermine the integrity of the testing program will be discharged. This includes, but is not limited to, sample adulteration, failure to provide adequate urine/hair sample or breath, having hair removed, cut or otherwise altered after being notified of obligation to be tested (but before submitting to sample collection), giving inadequate or misleading required information, falsification of documents, sample substitution, or other similar types of activities.**
- v. Screening Test (or initial controlled substance test) — an immunoassay screen to eliminate “negative” urine **or hair** specimens from further analysis.
- w. Screening Test (or initial alcohol test) — an analytical procedure to determine whether a covered employee may have a prohibited concentration of alcohol in his or her system.
- x. State Agency — an agency of any of the state, the District of Columbia, or Puerto Rico that participates under section 205 of the Hazardous Liquid Pipeline Safety Act of 1979 (App. U.S. C. 2009).
- y. Substance Abuse Professional (SAP) — a licensed physician (Medical Doctor or Doctor of Osteopathy), or a licensed or certified psychologist, social worker, employee assistance professional, or addiction counselor (certified by the National Association of Alcoholism and Drug Abuse Counselors Certification Commission), with knowledge of and clinical experience in the diagnosis and treatment of alcohol and controlled substances-related disorders.
- z. Supervisor(s) — Individuals responsible for observing the performance and behavior of employee; observation/documentation of events suggestive of reasonable suspicion; and post accident testing if determined that it is applicable.
- aa. **Under the Influence — any detectable level of Alcohol. The determination is not limited to nor must it consist of evidence of impairment of physical or mental ability or misconduct. An employee whose blood alcohol content is found to be equivalent to or greater than the governmentally recognized level for being under the influence shall be presumed to be Under the Influence of Alcohol.**

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



8. Prohibited Conduct:

- a. **Alcohol possession.** Company Policy prohibits consumption or possession of alcohol in unsealed or open containers while on Company premises or while engaged in Company business except in limited circumstances. In its discretion, management may prohibit the possession of all alcohol on Company premises at designated locations.
- b. **Controlled Substances.** The manufacture, use, possession, distribution, dispensation, purchase or sale of unauthorized controlled substances while on Company premises or while engaged in Company business is prohibited. Also, an employee reporting for work with any unauthorized controlled substance(s) in their body is in violation of Company Policy.
- c. Alcohol Concentration: Covered employees may not report for duty or remain on duty in a position requiring the performance of covered functions while having an alcohol concentration of 0.02 or greater.
- d. Pre-Duty Use.
 - (1) Employees may not perform covered functions within four hours after consuming alcohol.
 - (2) On-call employees who are not at work, but who could be called at any time to perform covered functions, are subject to the pre-duty alcohol prohibitions. Employees who have been notified to report for duty to respond to an emergency may not use alcohol after being notified to report. The supervisor will determine whether the employee should still report.
- e. On-Duty Use.
 - (1) Covered employees may not consume alcohol or controlled substances while performing covered functions.
 - (2) This prohibition also applies to covered employees who are at work and immediately available to perform covered functions.
- f. Alcohol Use After an Accident.
 - (1) Covered employees with knowledge of an accident (as previously defined) involving a pipeline for which they performed a covered function at or near the time of the accident may not use alcohol for eight hours after the accident unless they have been given a post-accident test, or the Company has determined that their performance could not have contributed to the accident.
- g. Refusal to Submit to Testing.
 - (1) Covered employees may not refuse to submit to a required controlled substance or alcohol test. The Company will not permit an employee who refuses to submit to such a test to perform or continue to perform covered functions, **and disciplinary action, up to and including discharge, may result.**

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- (2) Employees who do not provide sufficient urine, **hair**, or an adequate deep air sample for a required test will be referred for a medical examination. This examination is to indicate whether employees have a medical problem relating to why they are unable to complete a DOT **or other** required test. If there is **no** medical justification for the individual's failure to provide an adequate sample, then such conduct will be considered a refusal to submit to testing.

h. Criminal Offenses.

- (1) An employee charged with, convicted or under investigation in connection with a drug-related or alcohol-related criminal offense may be subject to discipline up to and including discharge for the first offense and/or required to submit to drug testing and/or an evaluation/rehabilitation as described under Section 8 Rehabilitation. If the employee tests positive for drugs or fails to follow all recommendations arising out of the evaluation, including Unauthorized Drug or Alcohol use, the employee will be discharged.
- (2) An employee charged with, convicted or under investigation of a drug-related or alcohol-related criminal offense must report this information to his supervisor or local Human Resources immediately. The Company will notify the appropriate federal agency, within ten days, of any employee convicted of violating a criminal drug statute if the violation occurred in the workplace.

C. Circumstances That Require Testing

Covered employees are subject to the following federally mandated alcohol and controlled substance tests:

1. Pre-Employment. Controlled substance tests are required when an individual is either hired or transferred into a covered position. **Hair tests will be administered after the acceptance of a contingent offer of employment. Subsequently, urine tests will be conducted prior to performing any DOT covered work. Should an applicant have insufficient hair to provide an adequate sample for a pre-employment test, the company, at its discretion, may allow that applicant to start work based on the results of a urine test (does not apply to casual employees such as interns or co-ops). However, such applicant must grow sufficient hair, if medically possible, to submit a hair sample for testing within the first 90 days of employment, with timing at the discretion of the Medical Director. A positive result on this test will result in immediate discharge of the applicant/employee.**

Further, all employees subject to Random Testing as described in 6. below, who are off of work in excess of 30 days must submit to re-employment testing (a subcategory of pre-employment testing) prior to return-to-duty.

The Company must, after obtaining the individual's written consent, obtain and review the information listed below from any employer for whom the employee performed DOT safety-sensitive covered functions in the previous two years prior to the date of the employee's application or transfer. The information must be obtained and reviewed no later than 14 days after the employee first performs safety-sensitive functions. However, every effort will be made to obtain this information before the employee performs covered responsibilities.

- a. Information on the employee's alcohol test in which a breath alcohol concentration of 0.04 or greater was indicated.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- b. Information on the employee's controlled substances test in which a positive result was indicated.
- c. Any refusal to submit to a required alcohol or controlled substance test (including verified adulterated or substituted drug test results).
- d. Other violations of DOT agency drug and alcohol testing regulations; and
- e. With respect to any employee who violated a DOT drug and alcohol regulation, documentation of the employee's successful completion of DOT return-to-duty requirements (including follow-up tests) is required.

2. Post-Accident.

- a. As soon as practicable after an accident (as defined above previously), each covered employee should make every attempt to contact their supervisor and must be **controlled substance and alcohol** tested if that employee's performance either contributed to the accident or cannot be discounted as a contributing factor to the accident.
 - (1) The employee will be given instructions for obtaining alcohol and controlled substance testing.
 - (2) An employee who is subject to post-accident testing must remain available for testing, or the Company may consider the employee to have refused to submit to testing.
 - (3) Employees subject to post-accident testing must refrain from consuming alcohol for eight hours following the accident, or until they submit to alcohol tests, whichever comes first. Notwithstanding the previous statement, employees should seek and obtain emergency medical care whenever necessary.
- b. A covered employee who is subject to post-accident testing will remain readily available for testing or may be deemed by the Company to have refused to submit to testing.
- c. Attempts to conduct alcohol testing will cease eight hours (32 hours for controlled substance testing) after the accident, even if no alcohol/controlled test has been conducted. In the case of a conscious but hospitalized employee, the operator should request the hospital or medical facility to obtain the sample and, if necessary, refer to the DOT and PHMSA testing requirements. If an employee is unconscious or otherwise unable to evidence consent to the procedure, the medical facility should collect the sample.
- d. The Company must document all cases where required alcohol tests are not completed within two or eight hours of the accident (32 hours for controlled substance testing). The Company must annually submit to PHMSA records documenting each case where a test was required but not administered within eight hours. See the Plan for documentation format. These records should be completed by the local Human Resources office and forwarded to the MRO.
- e. Company Responsibility. After receiving a report of an accident, the Company will test the employees (if not a fatality) for alcohol and controlled substances as soon as practicable.

3. Reasonable Suspicion.

- a. A covered employee must submit to **controlled substance and alcohol** testing if a supervisor has determined that reasonable suspicion exists that the employee has violated alcohol and/or controlled substance prohibitions.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- b. The Company shall not permit a covered employee to report for duty or remain on duty requiring the performance of covered functions while the employee appears to be under the influence of or impaired by alcohol **or controlled substances**. This determination must be based on a trained supervisor's specific, contemporaneous observations concerning the appearance, performance, behavior, speech, or body odors of the employee when the employee is performing covered functions, just before the employee is performing covered functions, or just after the employee has ceased performing covered functions. If it is determined that "reasonable suspicion" exists to test the employee, the individual will **not** be permitted to perform or continue to perform covered functions unless and until:
 - (1) An alcohol test is administered and the employee's alcohol concentration measures less than .02; **a negative Laboratory Test result is produced; or,**
 - (2) The start of the employee's next regularly scheduled duty period, but not less than eight hours following the determination that there is reasonable suspicion to believe that the employee has violated the prohibitions as contained in the Plan.
 - c. The supervisor's observations that lead to the "reasonable suspicion" determination shall be documented and in the case of controlled substance tests, a second supervisor must substantiate and concur in the decision to test the employee.
 - d. **An employee will not be permitted to return to work until results of the controlled substance and alcohol tests are known.** Specific disciplinary actions are described in detail in the Company's Drug and Alcohol Policy.
 - e. The supervisor who identifies an employee for reasonable suspicion testing cannot conduct the alcohol test as the breath alcohol technician for that employee.
 - f. If a reasonable suspicion alcohol test is not administered within two hours following the determination, the Company shall prepare and maintain on file a record stating the reasons why the test was not promptly administered. If the required alcohol test is not administered within eight hours of the determination, the Company shall cease all attempts to administer an alcohol test and shall state in the record the reasons for not administering the test. The Company must annually submit to PHMSA records documenting each case where a test was required but not administered within eight hours. These records should be completed by the local Human Resources office and forwarded to the MRO.
4. Return-to-Duty.
- a. Before covered employees return-to-duty in a covered function after engaging in prohibited conduct, **or voluntary rehabilitation for substance abuse**, they will undergo a return-to-duty test.
 - b. Employees cannot perform covered functions until a result indicating an alcohol concentration of less than 0.02 is obtained, and/or a negative controlled substance screen.
5. Follow-Up.
- a. Each covered employee, who has been identified by a Substance Abuse Professional (SAP) as needing assistance in resolving a problem with substance abuse and/or alcohol misuse and who has returned to duty performing a covered function, will be subject to follow-up controlled substance and alcohol testing.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- b. Follow-up tests will be unannounced (with respect to alcohol, at least six tests must be conducted in the first 12 months after the employee is back on the job). Follow-up testing may continue for a period of 60 months.
- c. The schedule for follow-up testing is established by the SAP and the Company's Medical Review Officer.

6. Random.

- a. All employees who perform covered functions are subject to random controlled substance testing. This includes supervisory personnel who actually perform covered functions but not those who just supervise such performance by others. Even if a supervisor performs a covered function only in an emergency, by doing so that supervisor would serve as an employee and thus be subject to random testing. An "employee" also includes part-time and temporary employees. A computer program has been developed to randomly select individuals every month in compliance with PHMSA regulations.
- b. Individuals randomly selected will be notified by a Company supervisor and instructed to report immediately to the designated testing site.
- c. The Company will conduct random testing on a monthly basis and will test at least 25% of the average number of covered employees every year or as otherwise directed by DOT 49 CFR 199.105. "Random" means that any employee may be tested once, more than once, or not at all in any given year.

7. Retests.

- a. If the Company desires to permit an employee to perform a covered function within eight hours following administration of an PHMSA mandated alcohol test indicating an alcohol concentration of 0.02 or greater but less than 0.04, the Company will first retest the employee.
- b. The employee may return to the covered function if the retest result indicates an alcohol concentration of less than 0.02 or, the start of the employee's next regularly scheduled duty period, but not less than eight hours following administration of the alcohol test.

8. Rehabilitation Provisions.

- a. Required Referrals and Evaluations — **A covered employee who has been assessed by a SAP as needing treatment for alcohol or controlled substance misuse or who has voluntarily submitted to rehabilitation for substance abuse cannot perform any covered function unless and until that employee has:**
 - (1) Been evaluated by a SAP to determine whether the employee is in need of assistance in resolving problems related to alcohol and controlled substance use. The SAP must provide some level of assistance in every case and at a minimum must recommend a course of action and/or treatment.
 - (2) Completed any treatment recommended by the SAP.
 - (3) Been evaluated by a SAP to ensure that the employee has properly followed the treatment program. The SAP must file a written report with the DER on the employee's treatment prior to return-to-duty.
 - (4) Undergone a return-to-duty alcohol test with resulting alcohol concentration of less than .02.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- (5) **Complied with any other requirements set forth in the Company's Drug and Alcohol Policy, including, but not limited to, passing a return-to-duty controlled substance test or tests, and signing a Return to Work Agreement.**

D. Breath Alcohol Testing Procedures

1. The Company will contract with medical facilities to conduct breath alcohol testing. At the testing facility a breath alcohol technician (BAT) will ensure the integrity of the process by conducting all tests in accordance with the prescribed DOT regulations. Only EBTs and ASDs listed on the NHTSA CPL will be used for DOT alcohol testing, and all BAT's will be trained and certified in accordance with CFR 40.213.
2. Screening Tests — The BAT will confirm the identity of employee to be tested and ask the employee to certify their participation in the testing process. Refusal by the employee to sign this certification will be regarded as a refusal to take the test. The testing process requires employees to provide a breath sample for analysis by blowing forcefully into a provided mouthpiece. The BAT will communicate results to the employee and document appropriately.
3. Confirmation Tests — If the result of the screening test is an alcohol concentration of 0.02 or greater, a confirmation test per DOT regulations will be performed. The BAT will conduct an "air blank" to ensure that the device is working correctly. The confirmation test will be conducted within 15 – 20 minutes of the completion of the screening test. Employees are instructed not to eat, drink, put any object or substance in his or her mouth, and, to the extent possible, not to belch during a waiting period before the confirmation test. The BAT will communicate results of the screening test with the employee. Refusal by the employee to certify results will be regarded as a refusal to take the test.
4. A breath alcohol test is invalid if:
 - a. 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; does not invalidate negative tests).
 - b. The BAT does not observe the minimum 15-minute waiting period prior to the confirmation test.
 - c. The BAT does not perform an air blank of the EBT before a confirmation test, or such an air blank does not result in a reading of 0.00.
 - d. The BAT does not sign the form.
 - e. The BAT fails to note in the remarks section of the form that the employee has failed or refused to sign the form after the test has been conducted.
 - f. An EBT fails to print a confirmation test result.
 - g. 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.
5. Complete details regarding alcohol testing procedures are included in the Plan. Covered employees can review these by contacting their supervisor or local Human Resources Consultant.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



E. Controlled Substance Testing Procedures

1. Testing for controlled substances is performed through analysis of a urine **and/or hair** specimen. DOT regulations **and Company Policy** require testing for the following five controlled substances:
 - a. Marijuana
 - b. Cocaine
 - c. Amphetamines
 - d. Opioids
 - e. Phencyclidine (PCP)
2. There are many safeguards required in order to protect covered employees. These include detailed specimen collection procedures, collection site requirements and security, review of chain-of-custody documentation on all collections, requirements for use of authorized collection site personnel (who are not to be an employee's supervisor), privacy at the collection site, and integrity and identity of the specimen. Also, all laboratories that perform DOT controlled substances testing must be certified by the Substance Abuse and Mental Health Services Administration.
3. The testing process begins when the covered employee provides a urine **and/or hair** specimen at a collection site designated by the Company. The collection site personnel monitor procedures to ensure that the collection is performed properly. The "collector" seals and labels the specimen, completes a chain-of-custody document, and prepares the specimen and accompanying paperwork for shipment to a certified controlled substance testing laboratory. The specimen collection procedures and chain of custody ensure that the specimen's security, proper identification and integrity are not compromised.
4. Each urine specimen is split into two bottles labeled as a "primary" and a "split" specimen. Both bottles are sent to the laboratory. Only the primary specimen is opened and used for testing. The split specimen bottle remains sealed and is stored at the laboratory. A screening test is performed on the primary specimen. If the results of this test are negative, they are reported to the Company's Medical Review Officer (MRO) and the testing is concluded.
5. The MRO performs review functions as required by the regulations of all confirmed positive, adulterated, substituted, or invalid drug test results received by the laboratory prior to releasing the results to the DER. If the results are positive for a controlled substance, a confirmation test is performed using the gas chromatography/mass spectrometry technique. If the second, confirmatory analysis of the primary specimen confirms the presence of controlled substances, this is reported to the Company's MRO. The MRO would then contact the employee (either in person or by telephone) within 48 hours and conduct an interview to determine if there is an alternative medical explanation for the controlled substance found in the employee's urine specimen. If the employee provides appropriate documentation and the MRO determines that it is legitimate medical use of the controlled substance, the test result will be reported as negative to the Company. If the MRO determines that there is no valid medical reason for the controlled substance, the MRO advises the DER that the employee was positive for an unauthorized controlled substance, and the employee will be immediately removed from the covered function.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



The Company will not stand down an employee prior to the DER being informed of a confirmed positive test in accordance with 49 CFR 40.21. The MRO also advises the employee of his right to request, within 72 hours, a second test of the split urine sample. The employee may specify retesting of the urine specimen by the original laboratory or by a second laboratory that is certified by the Department of Health and Human Services. If the employee specifies retesting by a second laboratory, the original laboratory must follow approved chain-of-custody procedures in transferring a portion of the sample.

6. Record of the test, including the type of test, date, location and collection site name, laboratory name, MRO name and test results are maintained by the Company.
7. **Similar procedures are followed for hair testing. One exception is that testing of a second hair specimen will require the provision of a new specimen of hair for testing if the initial sample taken was insufficient for a second test .**
8. Complete details regarding controlled substance testing procedures are included in the Plan. Covered employees can review these by contacting their supervisor or local Human Resources Consultant.

F. Employee Records

1. Employee records pertaining to testing will be maintained in a secure location with controlled access.
2. A covered employee is entitled, upon written request, to obtain copies of any records pertaining to the employee's use of alcohol, including any records pertaining to his alcohol tests. The Company shall promptly provide the requested records. Access to an employee's records shall not be contingent upon payment for records other than those specifically requested.
3. The Company shall permit access to all facilities utilized in complying with the alcohol requirements of 49 CFR Parts 199 and 40 to the Secretary of Transportation or any DOT or state agency with regulatory authority over the Company.
4. The records will only be released to:
 - a. The employee or a person identified by the employee (including subsequent employers), at the written request of the employee.
 - b. The Secretary of Transportation, any DOT agency, or a representative of a state agency with a regulatory authority over the Company.
 - c. The National Transportation Safety Board when requested as part of an accident investigation.
 - d. The employee or a decision maker in a lawsuit, grievance, or other proceeding initiated by or on behalf of the individual and arising out of a determination that the employee engaged in prohibited conduct.
5. The Plan includes procedures for maintaining all records related to alcohol and controlled substance testing.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



G. Consequences for Violating the Plan

1. Removal From Covered Duties: Covered employees are prohibited from performing covered functions if they have engaged in prohibited conduct under the PHMSA rule or another DOT agency's alcohol or substance abuse rules (including refusal to submit to testing, or having an adulterated or substituted urine specimen).
2. Required Evaluations and Testing:
 - a. Breath Alcohol Concentration of 0.02 – 0.039: Employee is removed from performing covered functions for at least eight hours or until the next shift or until retest is below 0.02.
 - b. Breath Alcohol Concentration of 0.04 or greater or positive substance abuse test: No covered employee who has violated the rules on alcohol misuse or substance abuse can perform any covered function unless and until that employee has:
 - (1) Been evaluated by a SAP to determine whether the employee is in need of assistance in resolving problems related to alcohol and controlled substance use. The SAP must provide some level of assistance in every case and at a minimum must recommend a course of action and/or treatment.
 - (2) Completed any treatment recommended by the SAP.
 - (3) Been evaluated by a SAP to ensure that the employee has properly followed the treatment program. The SAP must file a written report with the DER on the employee's treatment prior to return-to-duty.
 - (4) Undergone required return-to-duty testing.

H. Levels of Disciplinary Actions

Disciplinary action as set forth below will be taken under each of the described circumstances.

- 1. An employee who refuses to report for assessment with a substance abuse professional shall be removed from performing the covered function and will be discharged.**
- 2. An employee who refuses to provide an adequate breath for alcohol testing without a valid medical explanation after he has received notice of the requirement to be tested in accordance with the requirements of the Company's Plan, or who engages in conduct that clearly obstructs the alcohol testing procedure, will be removed from performing the covered function and will be discharged.**
- 3. Any employee who refuses to provide an adequate hair and/or urine specimen without an adequate medical explanation or engages in conduct prohibited by DOT regulations or fails to cooperate with controlled substance testing will be removed from performing the covered function and will be discharged.**
- 4. When the results of an alcohol test indicate an alcohol concentration of 0.04 or greater or the employee had a positive controlled substance test result, the employee will be removed from performing the covered function and will be discharged.**

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



- 5. When an employee, after assessment, is referred for rehabilitation and the employee refuses to enter or successfully complete such a rehabilitation/treatment assessment program the employee will be discharged.**
- 6. Any employee who is determined to be “Under the Influence” of alcohol in violation of the policy will be discharged.**
- 7. Employees who refuse to sign a consent form or refuse to consent to a search and/or laboratory testing will be discharged. Employees involved in conduct or actions that are considered an effort to undermine the integrity of the testing program will be discharged. This includes, but is not limited to, sample adulteration, failure to provide adequate urine/hair sample or breath, having hair removed, cut or otherwise altered after being notified of obligation to be tested (but before submitting to sample collection), giving inadequate or misleading required information, falsification of documents, sample substitution, late arrival at a testing facility or other similar types of activities.**
- 8. All other violations of this Plan and/or the Company Drug and Alcohol Policy will result in disciplinary action up to and including termination.**

I. Intervening When a Controlled Substance or Alcohol Problem is Suspected, Including Confrontation, Referral Program, and/or Referral to Management

1. Why You Should Get Involved:
 - a. Substance abuse is recognized as a problem throughout America, across all industries and occupations.
 - b. There are three good reasons why you should be concerned if any of your coworkers are using a controlled substance or alcohol on the job:
 - (1) Your health and safety may be at risk.
 - (2) Substance abuse costs you money.
 - (3) Substance abuse creates a negative work environment.
 - c. According to the National Institute on Alcohol Abuse and Alcoholism, controlled substance and alcohol use on the job cost society billions of dollars annually. Since most of this cost is passed on to you in the form of higher health insurance rates or in the prices you pay for consumer goods, controlled substance and alcohol use on the job costs you and your fellow workers.
 - d. Absenteeism among problem drinkers or alcoholics is 3.8 to 8.3 times greater than normal. If your fellow workers do not come to work, you may have to do their jobs in addition to your own.
 - e. Substance abusers do not function at their full potential. Not only is absenteeism a problem, when they are at work these employees may have reduced capabilities and productivity.
 - f. No matter what your position in the organization, there is something you can do to ensure that controlled substance and alcohol use on the job never becomes a problem at the Company. Acceptance of any misuse puts you, the Company, and the public at risk.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



2. What are Controlled Substances?

- a. There are many controlled substances that affect the mind or behavior, and are either legal or illegal. Legal controlled substances are those that have been approved for sale either by prescription or over the counter. Alcohol, which is legally available in beverages to anyone over the legal drinking age, is a controlled substance. Illegal controlled substances are those substances whose manufacture, sale, purchase for sale, or possession is prohibited by law. These include such controlled substances as marijuana, cocaine, PCP, opioids, and amphetamines identified in DOT Rule 49 CFR Part 40 Section 40.85 — or those controlled substances approved but obtained by illegal means or used for illicit purposes.
- b. Prescription drugs are controlled substances that have been determined to be safe, effective, and legal only when given under the direction of a licensed physician. Both the manufacture and dispensing of prescription drugs are regulated by laws enforced by the Food and Drug Administration, and the individual states. If used improperly, people can become physically dependent upon some prescription drugs (for example, morphine and Valium).
- c. Illegal controlled substances are sold and used against the law. They may harm those who use them — not only in terms of the physical and emotional damage they do directly, but also in terms of the criminal and financial consequences they bring. Many illegal controlled substances are manufactured clandestinely in the United States.

J. Effects of Controlled Substance and Alcohol Misuse on an Individual's Health, Work, and Personal Life

1. Alcohol is a central nervous system depressant. Taken in large quantities, it causes not only the euphoria associated with “being drunk” but also adversely affects judgment, ability to think, and motor functions. Drink enough alcohol fast enough and it can kill.
2. Long-term overuse of alcohol can cause liver damage, heart problems, sexual dysfunction, and other serious medical problems.
3. In some cases, alcohol use can lead to physical and psychological dependence on alcohol. Alcoholism is a serious chronic disease. Left untreated, it will inevitably get worse.
4. Workers who use alcohol (and other controlled substances) affect everyone. Studies show that compared to alcohol- and controlled substance-free workers, substance abusers are far less productive, miss more workdays, are more likely to injure themselves or someone else, and file more workers' compensation claims.
5. The measurable dollar costs of workplace substance abuse from absenteeism, overtime pay, tardiness, sick leave, insurance claims, and workers' compensation can be substantial. However, the hidden costs resulting from diverted supervisory and managerial time, friction among workers, damage to equipment, and damage to the Company's public image mean that workplace substance abuse can further cut profits and competitiveness.
6. Substance abuse can also destroy relationships, lead to serious problems with the law (e.g., drunk driving), and even cause harm to the people you love.
7. If substance abuse affects your work life, it could lead to job loss and all of the financial problems that would follow.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



8. There are numerous signs of illegal controlled substance use. For example, when a person is carrying controlled substances or has them hidden around the house, there is a strong possibility of use. Obviously, possession of controlled substance paraphernalia is also a likely sign of use.
9. Indications of prescription drug misuse vary according to the type of controlled substance in question. Controlled substance misuse may lead to dependence and withdrawal symptoms can be severe if controlled substance use is stopped suddenly.
10. Certain additional behavioral characteristics also seem to accompany the use of alcohol and other controlled substances. The clues can be found in all people who abuse these substances, regardless of age. Examples of these clues include:
 - An abrupt change in mood or attitudes.
 - Sudden and continuing decline in attendance or performance at work or in school.
 - Impaired relationships with family members or friends.
 - Unusual temper flare-ups.
 - Increased borrowing of money from parents or friends.
 - Stealing from the home, at school, or in the workplace.
 - Heightened secrecy about actions and possessions.
 - Association with a new group of friends, especially with those who use controlled substances.

K. Signs and Symptoms of Alcohol Misuse

Any one or more of the following signs may indicate a drinking problem:

- Family or social problems caused by drinking.
- Job or financial difficulties related to drinking.
- Loss of a consistent ability to control drinking.
- “Blackouts” or the inability to remember what happened while drinking.
- Distressing physical and/or psychological reactions if you try to stop drinking.
- A need to drink increasing amounts of alcohol to get the desired effect.
- Marked changes in behavior or personality when drinking.
- Getting drunk frequently.
- Injuring yourself — or someone else — while intoxicated.
- Breaking the law while intoxicated.
- Starting the day with a drink.

L. Signs and Symptoms of a Controlled Substance Problem

Controlled substances can show their effects in many different ways. Some of the most noticeable signs are:

- drowsiness, respiratory depression, constricted pupils, nausea, slurred speech, excitement, loss of appetite, poor perception of time and distance, relaxed inhibitions, disoriented behavior, watery eyes, runny nose, chills and sweats, convulsions, apathy, depression, and the use of controlled substance paraphernalia.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



M. Employee Assistance Program (EAP)

1. In compliance with DOT regulations the Company has developed an EAP that will provide educational and training materials on alcohol and controlled substance misuse to all covered employees. The Plan contains detailed information on what is available.
2. Available methods of evaluating and resolving problems associated with alcohol and controlled substance abuse.
 - a. Outpatient programs exist in a variety of settings:
 - (1) Community mental health centers
 - (2) Family service agencies
 - (3) Private physicians' and therapists' offices
 - (4) Occupational settings
 - (5) Specialized treatment facilities
 - b. Inpatient services, designed for those with more serious substance abuse problems, can be found in hospitals, residential care facilities, community halfway houses, and some alcoholism clinics.
 - c. Your local phone directory will list referral organizations such as:
 - (1) Local council on alcoholism
 - (2) Alcoholics Anonymous
 - (3) Community alcoholism or mental health clinic
 - (4) Social services
 - (5) County medical society
 - d. Information on the locations of substance abuse professionals are available from the Company's EAP. Individuals may call **1-800-865-1044**.

N. Training

1. All Company Supervisors will receive one hour of training on the physical, behavioral, speech and performance indicators of alcohol misuse and one hour of training on the physical, behavioral, speech and performance indicators of controlled substance abuse. The training will address the specific, contemporaneous, articulable observations concerning the appearance, behavior, speech and body odors of an employee who may be subjected to reasonable suspicion testing. The training also includes an explanation of the PHMSA testing regulations, the Company Drug and Alcohol Policy and a question and answer period. Supervisory and employee training is documented and maintained on file by each field location.
2. All employees will be provided with educational material on alcohol, controlled substance abuse and community assistance numbers prior to the start of alcohol testing and to each person transferred into or hired into a covered position. In addition, the Company's Drug and Alcohol Policy and its Employee Assistance Program will be reviewed.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



O. Contractor Monitoring

1. The Company is required to ensure that all contractors used by the Company have Alcohol and Substance Abuse Plans in compliance with PHMSA regulations. The Plan outlines the Company's contractor monitoring activity including use of third party administrators to monitor contractors.

Alcohol Misuse and Controlled Substance Abuse Prevention Plan



Acknowledgment and Receipt Notification

I hereby acknowledge that I have received a copy of the Company's PHMSA Alcohol Misuse and Controlled Substance Prevention Plan *Employee Guide*. I am aware that this Plan and the Company's Drug and Alcohol Policy outline the procedures concerning alcohol and controlled substance required by the Pipeline and Hazardous Materials Safety Administration of the Department of Transportation and the full Plans are available for review through the local Human Resources Department. I am also aware that the Company has a confidential Employee Assistance Program for resolving problems associated with substance abuse that I can access in my local area.

I understand that **disciplinary action, up to and including termination**, will result if I violate these procedures.

Employee Name (Print)

Employee Signature

Employee Number

Date

Return to Findlay, Human Resources – Room 3020.