

**NATIONALLY ACCREDITED FOR  
ADMINISTRATION OF  
DRUG AND ALCOHOL TESTING  
PROGRAMS (NAADATP)**

**PROGRAM POLICIES, PROCEDURES, STANDARDS  
AND APPLICATION**



# TABLE OF CONTENTS

Section I: Introduction .....	3
Section II: Requirements for Becoming a Nationally Accredited Drug and Alcohol Testing Program Provider .....	4
Requirements for Becoming a NAADATP Provider .....	4
The Consortium/TPA Best Practices Seminar or Online Advanced Drug Testing Management Course .....	4
Standards for Drug & Alcohol Testing Program Providers .....	4
Errors and Omissions Insurance .....	5
Section III: Program Fees .....	6
Section IV: Renewing Your Status as Nationally Accredited for Administration of Drug and Alcohol Testing Programs (NAADATP) .....	6
Section V: Dealing with Complaints against NAADATP Providers.....	6
Section VI: Standards for NAADATP Providers .....	7
Section VII: Instructions for Completing the NAADATP Application .....	12
Section VIII: General Application Information .....	13
Part A: Company Contact Information .....	13
Part B: Branch Location Information .....	13
Part C: Operational Status Information.....	14
Part D: Scope of Drug and Alcohol Testing Program Management Services .....	14
Section IX: Verification of Adherence to NAADATP Program Standards .....	15
Part A: Professional Competency.....	15
Part B: Procedural Administration .....	16
Part C: Confidentiality.....	19
Part D: Test Administration and Reporting .....	20
Part E: Accountability .....	21
Part F: Client Service.....	22
Part G: Professional Conduct .....	25
Section X: Declaration and Release .....	26
Section XI: NAADATP Fees .....	26

## **SECTION I: INTRODUCTION**

### **WHY ACCREDITATION?**

The goal of the Nationally Accredited for Administration of Drug and Alcohol Testing Programs (NAADATP) program is to have a national standards program for companies who provide drug free workplace program management services, to ensure they have company specific standard operating procedures, safeguards, knowledge and professional practices that keep their clients in compliance with federal drug and alcohol testing regulations. There is a demonstrated need for standards in drug and alcohol testing program management. A clear consensus of opinion exists that standards need to be adhered to on issues of random notification, notification of positives, liability insurance, pre-employment testing rules, Standard Operating Procedures (SOP) etc.

The NAADATP program not only provides guidelines for management of drugfree workplace programs, but also affords employers an assurance of quality. By utilizing a NAADATP provider, employers can rest assured that the provider of services is in full compliance with regulations. Through the required contract process, employers are made aware of what services they are being provided. In cases where the client does not have all services provided by the NAADATP provider, the contract spells out what additional services need to be performed for the employer to be in full compliance with any applicable federal regulations.

Through this program, accreditation provides the company with recognition for their excellence and adherence to industry-established standards.

### **MARKETING YOUR COMPANY AS A NATIONALLY ACCREDITED DRUG AND ALCOHOL TESTING PROGRAM**

As a Nationally Accredited for Administration of Drug and Alcohol Testing Programs, DATIA encourages you to market this achievement to current and potential clients as well as industry colleagues. To facilitate this, DATIA provides all NAADATP providers with a certificate attesting to this achievement, a decal to be displayed at the place of business, logo sheets for use on company letterhead and promotional materials, a press release for local newspapers and/or business journals, and copy material for use in company promotional materials. All of these marketing materials are provided as a means to assist NAADATP providers in establishing their company as a leader in the drug and alcohol testing program management industry.

## **SECTION II: REQUIREMENTS FOR BECOMING A NATIONALLY ACCREDITED DRUG AND ALCOHOL TESTING PROGRAM PROVIDER**

### **REQUIREMENTS FOR BECOMING A NAADATP PROVIDER**

To be recognized as Nationally Accredited for Administration of Drug and Alcohol Testing Programs, each company must meet the following requirements:

1. Company principal(s)/owner(s) must be currently employed in a position with active participation in drug and alcohol testing program management.
2. Successful completion of the DATIA Advanced Drug Testing Management Course Online, or DATIA's Consortium/TPA Best Practices Course in-person, by the company principal(s)/owner(s).
3. Company principal(s)/owner(s) shall sign and adhere to the Standards and Code of Conduct for Drug and Alcohol Testing Program Management.
4. Company shall maintain Errors and Omissions Insurance covering drug and alcohol testing with a minimum of \$500,000 coverage.

Companies with 1-10 employees are required to have one (1) principal/owner attend at least one of the relevant DATIA courses. Companies with 11+ employees are required to have two (2) principals/owners meet the above requirements. In addition, for companies with multiple office locations, there must be one (1) principal/owner that has attended one of the relevant DATIA courses for a maximum of three (3) office locations within a 100-mile radius.

### **THE CONSORTIUM/TPA BEST PRACTICES SEMINAR OR ONLINE ADVANCED DRUG TESTING MANAGEMENT COURSE**

This important DATIA seminar is presented by our industry expert who has formed and successfully managed drug-testing programs, and also presented in an online format. It is the first national series of seminars to address the need for a consensus to effectively manage drug and alcohol testing programs by consortium, third party administrators, and in-house program managers.

The course covers all aspects of drug and alcohol testing program management to include developing standard operating procedures, effective contracts, random testing, employee training and education, and provides a forum for group networking and problem solving.

Attendees of the Consortium/TPA Best Practices seminar and/or those that have completed the online Advanced Drug Testing Management Course leave their training with a comprehensive manual on managing drug and alcohol testing programs, as well as specific policies and procedures that can be implemented immediately. The manual is the only manual on how to manage drug and alcohol testing programs, and has proven to be a valuable resource for professionals.

### **STANDARDS FOR DRUG & ALCOHOL TESTING PROGRAM PROVIDERS**

Nationally Accredited for Administration of Drug and Alcohol Testing Programs providers are expected to adhere to strict industry established standards for operation of their business. Adherence to these standards will ensure the company and their program participants that they are performing their services within the federal regulations, and in such a way that will provide exceptional customer service and loyalty.

The Standards and Code of Conduct cover the following topics: Professional Competency, Procedural Administration, Confidentiality, Testing Administration and Reporting, Accountability, and Professional Conduct. In addition to the company's principal(s)/owner(s) signing that their company and its employees adhere to the standards, all company personnel are expected to adhere to the policies and procedures entailed in the standards at all times and without exception.

### **ERRORS AND OMISSIONS INSURANCE**

Maintaining Errors and Omissions Insurance specifically for drug and alcohol testing is of utmost importance in that general business liability and medical malpractice insurance specifically exclude coverage of drug and alcohol testing. This insurance coverage protects the drug and alcohol testing program manager and its program participants in the event an error is made in the testing process. Although errors amongst NAADATP providers are significantly lower than the average drug and alcohol testing program, mistakes can and will happen.

A committee of industry representatives has determined that \$500,000 of coverage is sufficient to cover the majority of claims while still remaining cost effective for the drug and alcohol testing provider.

### **SECTION III: PROGRAM FEES**

Online Advanced Drug Testing Management Course

\$199 for DATIA Members

\$299 for non-DATIA Members

Consortium/TPA Best Practices Seminar

\$379 for DATIA Members

\$479 for non-DATIA Members

Drug and Alcohol Testing Program Application Fee

\$0 for attendees of courses with in the last 12 months

\$95 for all previous course attendees

### **SECTION IV: RENEWING YOUR STATUS AS NATIONALLY ACCREDITED FOR ADMINISTRATION OF DRUG AND ALCOHOL TESTING PROGRAMS (NAADATP)**

Accreditation status will be renewable every two years on June 1. To renew, each company principal(s) will need to provide documentation that 8 contact hours (.8 CEU) of continuing education have been attended each year for a total of 16 contact hours (1.6 CEU). This continuing education shall include training seminars, courses, regulatory briefings, etc., that are on a subject matter germane to drug and alcohol testing and program management. The courses can be held by sources including, but not limited to, industry associations, government agencies (federal, state, and local), local business groups, colleges and universities, etc.

The company principal/owner will also need to provide DATIA with a current Certificate of Insurance, and a current signed copy of the Standards and Code of Conduct verifying that they continue to meet the standards.

### **SECTION V: DEALING WITH COMPLAINTS AGAINST NAADATP PROVIDERS**

Should an accusation be made that a Nationally Accredited Drug and Alcohol Testing Program is not abiding by either federal regulations or DATIA standards, the accuser will be required to submit his/her accusation in writing accompanied by documentation of the actions reported. This document will be forwarded to the DATIA Consortium/Third Party Administrator Issues Committee for investigation. The committee will complete an evaluation of the charges to include contacting the company that is being accused of wrongdoing. If the accusations are substantiated, and the committee determines that the company knowingly and consistently operates outside of the Standards and Code of Conduct, the affected company will lose their NAADATP status.

Providers who lose their NAADATP status may reapply for accreditation after a period of one year. In addition to the requirements for accreditation, the company must show documentation that the violation causing their accreditation status to be revoked has been corrected.

## **SECTION VI: STANDARDS FOR NAADATP PROVIDERS**

### **A. Professional Competency**

1. The company maintains a reference library of all current and updated federal regulations and guidance pertinent to DOT, SAMHSA, and mode(s) in which the company's clients operate. This reference will be easily accessible to all company employees.
2. Managers and employees possess a working knowledge of federal regulations regarding drug and alcohol testing and DOT modal interpretations and guidance.
3. Company manager (managers for companies employing more than 10 program staff persons) shall participate in a minimum of 8 contact hours of education and training programs per year (16 hours total) to maintain and enhance professional competency.

### **B. Procedural Administration**

1. The company maintains and uses a Standard Operating Procedures (SOP) manual to address daily and unusual circumstances, to ensure consistency and fairness. At a minimum, the SOP shall contain procedures for:
  - a. Enrolling and renewing clients in the program, including pre-employment testing, and confirmation of compliance.
  - b. Dealing with laboratories, including blind sampling, test rejections, Quarterly statistical summaries, re-testing samples, and split specimens.
  - c. Dealing with the MRO including turnaround time, client contact in case of positives, and return to duty authorizations.
  - d. Dealing with collectors, including setting up new sites, supplying collector kits, and use of chain of custody forms.
  - e. The random selection method outlined in detail.
  - f. How a client is notified of a random test.
  - g. How post-accident tests are administered both during regular business hours, and after hours when the company is closed.
  - h. How negative test results are reported.
  - i. How positive tests are reported, to whom and when.
  - j. The process for capturing data and statistical information for future use with the MIS.
  - k. File and record retention guidelines.
  - l. Rules of the drug and alcohol testing program, and plan for dealing with clients who violate rules and procedures.
  - m. Analysis for "what if" situations.
2. The company promulgates a contract with all current and prospective clients to include a clear enumeration of what roles and services are handled by the company and which roles and services are not being provided, but are required by law or regulation.

### **C. Confidentiality**

1. The company maintains all written and computer files in a locked and secured area and password protected electronic formats at all times to ensure confidentiality.
2. The company verifies client identity via a specific code word when the company is contacted by telephone.
3. The company verifies that each client utilizes a secure fax for receiving documents from the company. The company shall retain a signed verification of secure fax on file for each client.

### **D. Test Administration and Reporting**

1. The company uses a computer program with a random number generator utilizing true random selection to make their random selection of client employees.

2. The company notifies client for random testing by secured means, such as telephone with code word verification, certified mail, secured fax, or private courier. Regular mail or unsecured fax notifications are prohibited.
3. The company requires that the client pre-employment drug tests new employees, or provides written proof of exemption from the requirement, before adding client employee to random testing pool. Written proof shall consist of a signed letter from the employer or previous drug testing program verifying that the employee is exempt from a pre-employment test.
4. The company notifies clients of negative drug test results within 12 hours of receiving the results from the MRO.
5. The company has 24hr availability to receive positive drug test results from the MRO.
6. The company provides immediate telephone notification to client, followed by written notice, of any positive drug and/or alcohol result upon receiving verified results from the MRO.

### **E. Accountability**

1. The company notifies the DOT operating mode's headquarters in Washington, DC of any positive test results when the employee is an owner-operator, is not removed from his/her safety-sensitive position, or is returned to a safety sensitive position before successfully completing the return to duty process.
2. The company shall remove clients from the consortium random pool who do not comply with the program's and/or the DOT rules and regulations and place that client in their own random pool until the client complies with the instructions/rules, or cancel services to a client that does not comply with the program and/or DOT rules and regulations.
3. The company shall notify the DOT when a client's contract is canceled.

### **F. Client Service**

1. The company assigns each client a specimen collection site within 30 miles of each client location, barring exceptional circumstances such as testing in remote areas of the country, or a collection facility that will perform on-site collections at the client's facility.
2. The company has the ability, itself or through sub-contractors, to collect urine drug testing specimens from client's employees within 2 hours during business hours or 8 hours after business hours anywhere program operates, pending exceptional circumstances.
3. The company has 24-hour information availability for cases of post accident drug and alcohol testing.
4. The company has the ability, itself or through sub-contractors, to conduct post accident breath alcohol testing of client's employees within 2 hours during business hours or 8 hours after business hours anywhere program operates, pending exceptional circumstances.
5. The company provides a written listing of client employees enrolled in the random program provided to the client at the beginning of each year. The company will verify client employee lists each time before random selections are made.
6. The company has the capability to provide Management Information Systems (MIS) for client, and must provide notification as per requirement B (2) above of whether the service is provided or not.
7. The company maintains a current updated list of substance abuse treatment resources, including DOT approved SAPs, for the client.
8. The company shall include in its contracts with repeatedly used vendors (laboratory, Medical Review Officer, collection facilities), language that states the vendor must maintain a staff of professionals trained and/or certified in the particular service they will be providing the company, and that the vendor operates in accordance with proper DOT procedures. The company shall cease to utilize vendors that are found by the company not to be following federal regulations in their operations.
9. The company maintains current Errors and Omissions Insurance (Professional Liability) coverage of \$500,000 or greater specifically covering drug and alcohol testing.

## **G. Professional Conduct**

1. All managers and employees shall perform their duties in the management and administration the drug and alcohol testing program in accordance with these standards at all times.
2. A manager of a drug and alcohol testing program shall be in violation of this code if:  
convicted of a felony related to his/her professional functions, convicted of a misdemeanor related to his/her professional functions, disciplined by a regulatory body related to his/her professional functions, or no longer competent to manage or perform services.





**APPLICATION TO BECOME  
NATIONALLY ACCREDITED FOR ADMINISTRATION OF  
DRUG AND ALCOHOL TESTING PROGRAMS (NAADATP)**

Submitted by

---

Drug and Alcohol Testing Program Company Name  
(Referred to as Company throughout application)

To

The Drug and Alcohol Testing Industry Association  
Nationally Accredited for Administration of Drug and Alcohol Testing Programs  
Review Division

---

Date

As the industry standards, regulations, and legislation regarding the administration of drug and alcohol testing programs continue to develop, so will the criteria for becoming Nationally Accredited for Administration of Drug and Alcohol Testing Programs (NAADATP) through DATIA. As such, the policies, procedures, and process of becoming a NAADATP provider may be revised. Please ensure that the application submitted for Accreditation reflects the most current standards.

Applicants may contact DATIA at [info@datia.org](mailto:info@datia.org) or 800-355-1257 for more information and to ensure that they possess the most recent NAADATP application.

Incomplete applications will be returned for submission of additional application. No application will be reviewed until all required materials have been submitted to DATIA.

## **SECTION VII: INSTRUCTIONS FOR COMPLETING THE NAADATP APPLICATION**

Please complete Sections VIII and IX in their entirety. If your responses require more than the space provided please use a separate sheet, indicate the item that the response is for, and attach to the application. For an application to be considered complete, the applicant must do the following:

1. All responses must be legibly typed or printed.
2. Complete Section VIII in its entirety. Applicants must indicate the date that they attended and completed the DATIA Consortium/TPA Best Practices Seminar or the Online Drug and Alcohol Testing Program Management Course. If required (more than ten program employees on staff), the date that the company's alternate principal/manager attended the course in its entirety must also be indicated.
3. Complete Section IX in its entirety. All questions must be answered and **ALL STANDARDS MUST BE MET** for Accreditation.
4. Read and sign the Declaration and Release at the conclusion of this application.
5. Attach a Certification of Insurance from your Errors and Omissions Insurance Provider.
6. Forward all information required to:

**Drug and Alcohol Testing Industry Association (DATIA)**  
**1325 G Street, NW • Suite 500#5001**  
**Washington, DC 20005**  
**Fax: 202-315-3579**  
**Questions: 800-355-1257 \* [info@datia.org](mailto:info@datia.org) \* [www.datia.org](http://www.datia.org)**

## SECTION VIII: GENERAL APPLICATION INFORMATION

### PART A: COMPANY CONTACT INFORMATION

Name of Applicant Company: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web site: \_\_\_\_\_

Name of Principal/Manager: \_\_\_\_\_

Title: \_\_\_\_\_

# of employees working for the drug and alcohol testing program at this location: \_\_\_\_\_

*Complete only if Company employs more than 10 program staff at this location:*

Name of Alternate Principal/Manager: \_\_\_\_\_

Title: \_\_\_\_\_

### PART B: BRANCH LOCATION INFORMATION

Please list any branches of your company that you are applying for Accreditation. Please note that a Principal/Manager who has taken the Consortium/TPA Best Practices Seminar or Online Advanced Drug Testing Management Course can only serve as the Principal/Manager for up to three locations within a hundred-mile radius for purposes of the NAADATP program.

Branch 1: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web site: \_\_\_\_\_

Name of Principal/Manager: \_\_\_\_\_

Title: \_\_\_\_\_

# of employees working for the drug and alcohol testing program at this location: \_\_\_\_\_

Branch 2: \_\_\_\_\_

Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Telephone: \_\_\_\_\_ Fax: \_\_\_\_\_

Email: \_\_\_\_\_ Web site: \_\_\_\_\_

Name of Principal/Manager: \_\_\_\_\_

Title: \_\_\_\_\_

# of employees working for the drug and alcohol testing program at this location: \_\_\_\_\_

**PART C: OPERATIONAL STATUS INFORMATION**

1. Is administration of drug and alcohol testing programs the primary business of this company?

Yes            No

If "No", please state primary business of company: \_\_\_\_\_  
\_\_\_\_\_

2. Is this company a subsidiary or division of a parent company?

Yes            No

If "Yes", what company? \_\_\_\_\_  
\_\_\_\_\_

3. Has this company operated under a name other than the company name indicated in Part A of this section?

Yes            No

If "Yes", please indicate previous name and dates of operation under this name: \_\_\_\_\_  
\_\_\_\_\_

**PART D: SCOPE OF DRUG AND ALCOHOL TESTING PROGRAM MANAGEMENT SERVICES**

1. How many clients does the drug and alcohol testing program service? \_\_\_\_\_

2. What is the size of the drug and alcohol testing program's random pool(s)? \_\_\_\_\_  
\_\_\_\_\_

3. Which of the following services are provided in-house by the drug and alcohol testing program?

- |  |   |  |
|--|---|--|
| <input type="checkbox"/> Specimen Collection | <input type="checkbox"/> Medical Review Officer | <input type="checkbox"/> Supervisor Training |
| <input type="checkbox"/> Employee Training   | <input type="checkbox"/> Breath Alcohol Testing | <input type="checkbox"/> MIS Reporting       |

## **SECTION IX: VERIFICATION OF ADHERENCE TO NAADATP PROGRAM STANDARDS**

### **PART A: PROFESSIONAL COMPETENCY**

1. Does your company maintain a reference library of all current and updated federal regulations and guidance pertinent to DOT, SAMHSA, and mode(s) in which the drug and alcohol testing program clients operate?

Yes       No

If "Yes," please explain how this reference library is maintained. If "No", please provide an explanation: \_\_\_\_\_

---

---

- 1a. Is this reference library easily accessible to all C/TPA employees?

Yes       No

If "Yes," please indicate where this reference library is maintained. If "No", please provide an explanation: \_\_\_\_\_

---

---

2. Do all managers and employees possess a working knowledge of federal regulations regarding drug and alcohol testing and DOT modal interpretations and guidance?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

3. Can the drug and alcohol testing program manager (managers for companies employing more than 10 program staff persons) commit to participate in a minimum of 8 contact hours of education and training programs per year (16 hours total) to maintain and enhance professional competency?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

**PART B: PROCEDURAL ADMINISTRATION**

1. Does the company maintain and use a Standard Operating Procedures (SOP) manual to address daily and unusual circumstances, to ensure consistency and fairness?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1.a Does the SOP contain procedures for enrolling and renewing clients in the testing program, including pre-employment testing, and confirmation of compliance?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1b. Does the SOP contain procedures for dealing with laboratories, including blind sampling, test rejections, quarterly statistical summaries, re-testing samples, and split specimens?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1c. Does the SOP contain procedures for dealing with the MRO including turnaround time, client contact in case of positives, and return to duty authorizations?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1d. Does the SOP contain procedures for dealing with collectors, including setting up new sites, supplying collector kits, and use of chain of custody forms?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1e. Does the SOP contain procedures for the random selection method outlined in detail?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1f. Does the SOP contain procedures for how a client is notified of a random test?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1g. Does the SOP contain procedures for how post-accident tests are administered both during regular business hours, and after hours when the C/TPA is closed?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1h. Does the SOP contain procedures for how negative test results are reported?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

1i. Does the SOP contain procedures for how positive tests are reported, to whom and when?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

1j. Does the SOP contain procedures for the process for capturing data and statistical information for future use with the MIS?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

1k. Does the SOP contain procedures for file and record retention guidelines?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

1l. Does the SOP contain procedures for rules of the drug and alcohol testing program and a plan for dealing with clients who violate rules and procedures?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

1m. Does the SOP contain procedures for analysis for "what if" situations?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

2. Does the company promulgate a contract with all current and prospective clients to include a clear enumeration of what roles and services are handled by the company and which roles and services are not being provided, but are required by law or regulation?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

### **PART C: CONFIDENTIALITY**

1. Does the company maintain all written and computer files in a locked and secured area and password protected electronic formats at all times to ensure confidentiality?

Yes       No

If "Yes," please describe the secured area. If "No", please provide an explanation: \_\_\_\_\_

---

---

2. Does the company verify client identity via a specific code word when contacted by telephone?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

3. Does the company verify that each client utilizes a secure fax for receiving documents from the company?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

3a. Does the company retain a signed verification of secure fax on file for each client?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

**PART D: TEST ADMINISTRATION AND REPORTING**

1. Does the company use a computer program with a random number generator utilizing true random selection to make their random selection of client employees?

Yes       No

If "Yes," please indicate random selection program. If "No" provide an explanation: \_\_\_\_\_

---

---

2. Does the company notify clients for random testing by secured means, such as telephone with code word verification, certified mail, secured fax, or private courier?

Yes       No

If "Yes," please indicate the means used of notifying clients. If "No", please provide an explanation: \_\_\_\_\_

---

---

3. Does the company require that the client pre-employment drug test new employees, or provide written proof of exemption from the requirement, before adding client employee to random testing pool?

Yes       No

If "Yes," please indicate what must be provided to your company for exemption from a pre-employment drug test. If "No", provide an explanation:

---

---

---

4. Does the company notify clients of negative drug test results within 12 hours of receiving the results from the MRO?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Does the company have 24hr availability to receive positive drug test results from the MRO?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Does the company provide immediate telephone notification to client, followed by written notice, of any positive drug and/or alcohol result upon receiving verified results from the MRO?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

#### **PART E: ACCOUNTABILITY**

1. Does the company notify the DOT operating mode's headquarters in Washington, DC of any positive test results when the employee is an owner-operator, is not removed from his/her safety-sensitive position, or is returned to a safety sensitive position before successfully completing the return to duty process?

- Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. Does the company remove clients from the consortium random pool who do not comply with the program's and/or the DOT rules and regulations and place that client in their own random pool until the client complies with the instructions/rules, or cancel services to a client that does not comply with the program and/or DOT rules and regulations?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

3. Does the company notify the DOT when a client's contract is canceled?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

#### **PART F: CLIENT SERVICE**

1. Does the company assign each client a specimen collection site within 30 miles of each client location, barring exceptional circumstances such as testing in remote areas of the country, or a collection facility that will perform on-site collections at the client's facility?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

2. Does the company have the ability, itself or through sub-contractors, to collect urine drug testing specimens from client's employees within 2 hours during business hours or 8 hours after business hours anywhere program operates, pending exceptional circumstances?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

3. Does the company have 24-hour information availability for cases of post accident drug and alcohol testing?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. Does the company have the ability, itself or through sub-contractors, to conduct post accident breath alcohol testing of client's employees within 2 hours during business hours or 8 hours after business hours anywhere program operates, pending exceptional circumstances?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5. Does the company provide a written listing of client employees enrolled in the random program provided to the client at the beginning of each year?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

5a. Does the company verify client employee lists each time before random selections are made?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6. Does the company have the capability to provide Management Information Systems (MIS) for client?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

6a. Does the company provide notification as per requirement B (2) above of whether the service is provided or not?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

7. Does the company maintain a current updated list of substance abuse treatment resources, including DOT approved SAPs, for the client?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

8. Does the company include in its contracts with repeatedly used vendors (laboratory, Medical Review Officer, collection facilities), language that states the vendor must maintain a staff of professionals trained and/or certified in the particular service they will be providing the company, and that the vendor operates in accordance with proper DOT procedures?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

8a. Does the company cease to utilize vendors that are found by the company not to be following federal regulations in their operations?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

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

9. Does the company maintain current Errors and Omissions Insurance (Professional Liability) coverage of \$500,000 or greater specifically covering drug and alcohol testing?

Yes       No

If "Yes," please attach a Certification of Insurance from your Errors and Omissions Insurance provider. If "No," please provide an explanation:

---

---

---

**PART G: PROFESSIONAL CONDUCT**

1. Do all managers and employees perform their duties in the management and administration the drug and alcohol testing program in accordance with these standards at all times?

Yes       No

If "No," please provide an explanation: \_\_\_\_\_

---

---

2. Has the principal/manager of the drug and alcohol testing program ever been convicted of a felony related to his/her professional functions, convicted of a misdemeanor related to his/her professional functions, disciplined by a regulatory body related to his/her professional functions, or no longer competent to manage or perform services?

Yes       No

If "Yes," please provide an explanation: \_\_\_\_\_

---

---

## SECTION X: DECLARATION AND RELEASE

By signing below, I attest that I am submitting this application on behalf of my company to become Nationally Accredited for Administration of Drug and Alcohol Testing Programs (NAADATP) through the Drug and Alcohol Testing Industry Association (DATIA). I understand that information gathered in this application may be used by DATIA for statistical purposes and for evaluation of the NAADATP program and standards. I understand that DATIA will make every effort to keep specific information contained in this application concerning my company and its operations confidential. I further understand that DATIA reserves the right to verify any information contained in this application, and that providing false or misleading information or otherwise violating the rules and procedures of the NAADATP program may be grounds for the rejection of this application, revocation of accreditation, or other appropriate disciplinary actions. I understand that our company must notify DATIA of any company changes that affect the information contained within this application.

Name of Principal/Manager: \_\_\_\_\_

Signature: \_\_\_\_\_

Date: \_\_\_\_\_

## SECTION XI: NAADATP FEES

For those that attended the Consortium/TPA Best Practices Seminar or the online Advanced Drug Testing Program Course more than 12 months ago, there is a \$95 application processing fee.

No fee is required. I attended the Consortium/TPA Best Practices Seminar or Online Advanced Drug Testing Program Course within the last 12 months on \_\_\_\_\_  
month/day/year

\$95 is enclosed. I attended the Advanced Drug Testing Program Course more than 12 months ago on \_\_\_\_\_  
month/day/year

Check # \_\_\_\_\_

MC       VISA       AMEX

Card # \_\_\_\_\_ Exp. Date: \_\_\_\_\_

Name on Card: \_\_\_\_\_

Signature: \_\_\_\_\_