

1 Department of Health

2

3 Adopted Permanent Rules Relating to Drug and Alcohol Testing

4 Laboratories; Licensing

5

6 Rules as Adopted

7

DRUG AND ALCOHOL TESTING OF EMPLOYEES

8 4740.1010 DEFINITIONS.

9 Subpart 1. Scope, application. The following terms used
10 in parts 4740.1020 to 4740.1080 have the meanings given them in
11 this part.

12 Subp. 2. Alcohol. "Alcohol" means ethyl alcohol.

13 Subp. 3. Commissioner. "Commissioner" means the
14 commissioner of the Minnesota Department of Health.

15 Subp. 4. Confirmatory test. "Confirmatory test" means a
16 drug or alcohol test, run on a sample that was positive on the
17 initial screening test. Techniques for a confirmatory test are
18 described in part 4740.1070, subparts 5 and 6.

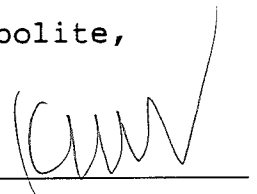
19 Subp. 5. Department. "Department" means the Department of
20 Health.

21 Subp. 6. Drug. "Drug" means a controlled substance as
22 defined in Minnesota Statutes, section 152.02, and as updated
23 yearly by rules of the Board of Pharmacy.

24 Subp. 7. Employee. "Employee" means a person, independent
25 contractor, or person working for an independent contractor who
26 performs services for compensation, in whatever form, for an
27 employer.

28 Subp. 8. Employer. "Employer" means a person, independent
29 contractor, or entity located or doing business in this state
30 and having one or more employees, and includes the state of
31 Minnesota and all political or other governmental subdivisions
32 of the state.

33 Subp. 9. Initial screening test. "Initial screening test"
34 means a drug or alcohol test ~~that-can-detect-the,~~ the results of
35 which indicate presumptive presence of a drug, drug metabolite,



1 or alcohol in a sample. Techniques for an initial screening
2 test are described in part 4740.1070, subparts 5 and 6.

3 Subp. 10. Initial screening test minimum detection
4 level. "Initial screening test minimum detection level" means
5 the level at which a laboratory is capable of detecting a drug
6 or drug metabolite using a screening test. The values are
7 derived from the NIDA initial cutoff levels in Mandatory
8 Guidelines for Federal Workplace Drug Testing Programs; Final
9 Guidelines; Notice, paragraph 2.4(e)(1), as provided by the
10 Federal Register, Volume 53, Number 69, page 11983, Monday,
11 April 11, 1988.

12 Subp. 11. Job applicant. "Job applicant" means a person,
13 independent contractor, or person working for an independent
14 contractor who applies to become an employee of an employer, and
15 includes a person who has received a job offer that is
16 contingent on the person passing drug or alcohol testing.

17 Subp. ~~11~~ 12. Laboratory. "Laboratory" means a person,
18 corporation, or other entity, including a governmental entity,
19 that examines, analyzes, or tests samples.

20 Subp. ~~12~~ 13. NCCLS. "NCCLS" means the National Committee
21 for Clinical Laboratory Standards, Villanova, Pennsylvania.

22 Subp. ~~13~~ 14. NIDA. "NIDA" means the National Institute
23 ~~for~~ on Drug Abuse, of the Alcohol, Drug Abuse, and Mental Health
24 Administration, United States Health and Human Services
25 Department.

26 Subp. ~~14~~ 15. Positive test result. "Positive test result"
27 means a finding of the presence of drugs, alcohol, or their
28 metabolites in the sample tested by a confirmatory test in
29 levels at or above the threshold detection levels set by the
30 commissioner under part 4740.1080.

31 Subp. ~~15~~ 16. Presumptive presence. "Presumptive presence"
32 means some indication of the presence of a drug, drug
33 metabolite, or alcohol that, in the judgment of the laboratory
34 director or the laboratory director's designee, provides a
35 reasonable basis for conducting a confirmatory test. The
36 presumptive presence of a drug, drug metabolite, or alcohol is

1 not a positive test result.

2 Subp. ~~16~~ 17. **Sample.** "Sample" means a substance derived
3 from a nonhuman source and collected for the purpose of analysis
4 or a tissue, blood, excretion, or other bodily fluid specimen
5 obtained from a human for the detection of a chemical, etiologic
6 agent, or histologic abnormality.

7 Subp. ~~17~~ 18. **Threshold detection level.** "Threshold
8 detection level" means that the level at which the presence of a
9 drug, drug metabolite, or alcohol could can be reasonably be
10 expected to be detected in-a-sample by a confirmatory test
11 performed by a laboratory that meets the standards of parts
12 4740.1010 to 4740.1090. The threshold detection level is
13 neither meant to indicate impairment nor any relationship
14 between the time of the test and the time of use of a drug or
15 alcohol by the employee or applicant. The threshold detection
16 level simply indicates the level at which a valid conclusion can
17 be drawn that the drug or alcohol is present in the employee's
18 or applicant's sample.

19 4740.1020 LICENSE REQUIRED FOR LABORATORIES PERFORMING DRUG AND
20 ALCOHOL TESTING FOR EMPLOYERS.

21 A laboratory that performs drug and alcohol laboratory
22 tests of employees and job applicants for Minnesota employers
23 must possess a valid license to do so. A laboratory must obtain
24 a license according to the procedures in parts 4740.0100 to
25 4740.0170, as proposed at 13 State Register 1079 and as
26 subsequently adopted. In addition to the information required
27 on an application for a license, a laboratory that performs only
28 initial drug and alcohol screening tests must disclose on its
29 application the name of the licensed laboratory that performs
30 its confirmatory tests.

31 4740.1025 EXCEPTION.

32 A medical clinic, hospital, or other medical facility need
33 not be licensed under parts 4740.1010 to 4740.1080 to perform a
34 breath test as an initial screening test for alcohol if:

35 A. the medical clinic, hospital, or other medical

1 facility is not owned or operated by the employer; and

2 B. the results of the breath test are confirmed by a
3 blood test performed by a laboratory licensed under parts
4 4740.1010 to 4740.1080.

5 4740.1040 RECIPROCITY.

6 A license shall be granted to a laboratory located in
7 another state, if the requirements of Minnesota Statutes,
8 section 181.953, subdivision 1, paragraph (c), are met.

9 4740.1050 TERM OF LICENSE.

10 Laboratories shall be licensed for a term of one year
11 ~~beginning on July 1 and ending June 30~~. Unless a laboratory
12 submits a timely application for license renewal, the license
13 expires without further notice at the end of the term.

14 4740.1060 FEES.

15 Subpart 1. Annual license fee required. The laboratory
16 must pay an annual license fee and other required costs with the
17 initial application for license and with each renewal
18 application. The amount of the fee and other required costs is
19 determined under subpart 3. ~~It is based upon the number of~~
20 ~~samples taken from Minnesota employees, that the laboratory~~
21 ~~tests.~~ A laboratory must pay the fees and costs required under
22 this part before a license is issued.

23 Subp. 2. Information required to determine fee. The
24 laboratory must submit an estimate of the ~~number of annual~~
25 ~~Minnesota employee samples to be tested for drugs and alcohol~~
26 laboratory annual receipts during the current accounting year
27 with the application for a license or license renewal. The
28 laboratory must submit to the department quarterly reports of
29 the ~~volume of actual employee drug and alcohol testing samples~~
30 laboratory annual receipts and the results of proficiency
31 testing results for the past quarter. The statistics from these
32 reports are used to adjust the license fee collected from the
33 laboratory on its next license renewal application to reflect
34 actual ~~sample volume~~ laboratory annual receipts.

1 Subp. 3. License fee schedule. The annual license fees
 2 ~~are determined according to the following schedule:~~ fee is made
 3 up of an application fee and inspection fee as described in
 4 items A and B. The fees are nonrefundable.

5	License fee--(a)	\$1,200--
6	(b) Total annual	Total annual
7	alcohol samples---+---drug samples---X---\$3/sample	
8	taken from	taken from
9	Minnesota	Minnesota
10	employees	employees
11	<u>-----</u>	

12 2

13 ~~A sample obtained for both alcohol and drug testing is~~
 14 ~~considered as one alcohol sample and one drug sample for fee~~
 15 ~~purposes.--The \$1,200 in part (a) of the schedule is~~
 16 ~~nonrefundable.~~

17 A. The application fee is determined as follows:

18	<u>Laboratory Annual</u>	<u>License fee</u>
19	<u>Receipts</u>	
20		
21	less than \$500,000	\$ 600
22	\$500,000 to \$2,000,000	1,200
23	\$2 million to \$10 million	1,800
24	more than \$10 million	2,400; and
25	<u>B. The inspection fee is \$1,200 per year per lab.</u>	

26 C. Laboratories located outside Minnesota are
 27 assessed actual cost of additional labor, travel, and lodging
 28 expenses the department incurs in the laboratory inspection.

29 4740.1065 ANNUAL INSPECTION.

30 The commissioner shall conduct periodic inspections of
 31 laboratories licensed for drug and alcohol testing of employees.
 32 Inspections ~~shall~~ may be unannounced and occur at least annually.

33 4740.1070 PERFORMANCE METHODS REQUIRED FOR ISSUANCE OF A LICENSE.

34 Subpart 1. Standards required. To qualify for a license
 35 to conduct drug and alcohol testing for Minnesota employees and
 36 job applicants, the officers or the owner of a laboratory must
 37 use the performance methods described in subparts 2 to 8.

38 Subp. 2. Test samples. The usual sample for drug testing

1 is freshly voided urine. A breath, urine, or blood sample may
2 be used for initial screening tests. When the breath test is
3 used as the initial screening test for alcohol, a blood sample
4 shall be obtained for the confirmatory test. The blood sample
5 shall be collected immediately after the breath test. When an
6 initial positive urine test indicates the presence of drugs, a
7 blood ~~test-may~~ or urine sample shall be used for the
8 confirmatory test.

9 The sample volume must be adequate to allow for the initial
10 screening test, a confirmatory test, and a confirmatory retest.

11 Subp. 3. Collection of urine samples; procedures. The
12 laboratory must have written procedures for collecting urine
13 samples. The collection procedures must contain paragraphs 6
14 and 11 to 16 of the specimen collection procedures in Standards
15 for Certification of Laboratories Engaged in Urine Drug Testing
16 for Federal Agencies, NIDA, as provided by the Federal Register,
17 volume 52, pages 30639 and 30640, Friday, August 14, 1987.
18 Paragraphs 1 to 5 and 7 to 10 of these procedures are optional.
19 The site where the sample is collected must have a stall or
20 partitioned area that allows the individual being tested to
21 provide the individual's urine specimen in privacy. The
22 collection site person must sign and date either the tape
23 sealing the sample container or the sample container label.

24 Subp. 4. Collection of blood samples; procedures. The
25 laboratory must have written procedures for collection of blood
26 samples. The procedure must address identification of the
27 employee or job applicant, necessary collection supplies,
28 seating or positioning of the employee or job applicant during
29 sample collection, cleansing of the skin at the venipuncture
30 site, and verification that the sample and paperwork are from
31 the individual from which the sample was collected. NCCLS
32 Guidelines H3-A2, Procedures for Collection of Diagnostic Blood
33 Specimens by Venipuncture, 2nd Edition, Approved Standard, 1984,
34 is an acceptable guide for the collection of blood samples.
35 This document is not subject to frequent change, is incorporated
36 by reference, and is available at the State Law Library, Ford

1 Building, 117 University Avenue, Saint Paul, Minnesota 55155.

2 The collection site person must sign either the tape
3 sealing the sample container or the sample container label.

4 Subp. 5. **Techniques for drug testing.** For an initial
5 screening test for drugs or drug metabolites, the laboratory
6 must use a chromatographic technique or an immunoassay method.
7 Samples that show the presumptive presence of a drug or drug
8 metabolite must be confirmed by the gas chromatography/mass
9 spectrometry (GC/MS) technique.

10 Subp. 6. **Techniques for alcohol testing.** A breath test,
11 alcohol dehydrogenase reaction, microdiffusion, or oxidation of
12 distillate with potassium dichromate may be used as a method to
13 initially test for the presence of alcohol. The presumptive
14 presence of alcohol must be confirmed using gas chromatography.

15 Subp. 7. **Confirmatory tests required.** A laboratory that
16 performs only initial testing must obtain confirmatory results
17 from a licensed laboratory that performs confirmatory tests.

18 Subp. 8. **Chain-of-custody procedures for handling**
19 **samples.** The laboratory must follow written chain-of-custody
20 procedures that, at a minimum, meet the requirements of items A
21 to C.

22 A. Possession of a sample must be traceable to the
23 employee from whom the sample is collected, from the time the
24 sample is collected through the time the sample is tested, the
25 test result reported, the sample retested, and the sample stored.

26 B. At all times, the sample must be in the possession
27 of, in view of, or placed in a secured area by a person
28 authorized to handle the sample.

29 C. A sample must be accompanied by a written
30 chain-of-custody record. Individuals relinquishing or accepting
31 possession of the sample must record the time the possession of
32 the sample was transferred and must sign and date the
33 chain-of-custody record at the time of transfer.

34 Subp. 9. **Storage of positive samples.** All confirmed
35 positive samples shall be stored frozen for at least six
36 months. The sample container must be sealed and labeled. The

1 freezer must be locked or be located in a secure area.

2 Subp. 10. **Requirements for directors.** The director of the
3 laboratory must be a full-time employee of the laboratory, must
4 possess a doctoral, medical doctor, or a master's degree in a
5 biological or medical science, and must have at least three
6 years' experience in an analytical toxicology laboratory.

7 Subp. 11. **Proficiency testing required.** Satisfactory
8 participation in a proficiency testing program is required of a
9 laboratory applying for or renewing a license. The Forensic
10 Urine Drug Testing surveys conducted by the College of American
11 Pathologists and the American Association for Clinical Chemistry
12 and the NIDA Performance Test Program are acceptable proficiency
13 testing programs. The laboratory must participate at the
14 appropriate screening and confirmatory test levels for which an
15 application for license is submitted.

16 Subp. 12. **Procedures for proficiency testing.** Before
17 applying for or renewing a license, a laboratory must
18 participate in and report the results of three cycles of
19 proficiency testing. The laboratory must mail proficiency
20 testing results to the commissioner.

21 The procedures for handling and testing proficiency test
22 samples after receipt by the laboratory must be identical to the
23 procedures for normal laboratory samples.

24 Laboratory personnel shall not be informed that these
25 samples are part of a performance test to the extent possible.

26 A licensed laboratory may also be subjected to blind
27 proficiency testing. Performance on blind testing samples is
28 required at the same level as for the open proficiency testing.

29 A false-positive result from a confirmatory test sample is
30 unsatisfactory performance. Two false-positive results from a
31 screening test sample during a one-year period constitute
32 unsatisfactory performance. The laboratory must inform the
33 commissioner, in writing, of any false-positive test result on a
34 proficiency testing sample, with a plan of corrective action.
35 The commissioner will be informed within 14 days of receipt of
36 the proficiency testing report.

1 Subp. 13. Laboratory procedure manual. The laboratory
 2 must possess and follow a laboratory procedure manual. The
 3 laboratory manual must describe the individual test procedures
 4 performed by the laboratory. The manual must have a table of
 5 contents and numbered pages. The manual must be reviewed
 6 annually. The description of the test procedures must include
 7 sections addressing the sample used for the test, reagents,
 8 supplies and materials, equipment calibration, quality control,
 9 the step-by-step procedure, calculations, reporting results,
 10 special notes, safety precautions, limitations of the procedure,
 11 references, and flow diagrams. Changes in a procedure must be
 12 reviewed and dated. Clinical Laboratory Procedure Manuals;
 13 Approved Guidelines, GP2-A, National Committee for Clinical
 14 Laboratory Standards, 1984, is an acceptable guide to writing a
 15 laboratory manual. This document is not subject to frequent
 16 change, is incorporated by reference, and is available at the
 17 State Law Library, Ford Building, 117 University Avenue, Saint
 18 Paul, Minnesota 55155.

19 4740.1075 INITIAL SCREENING TEST; MINIMUM DETECTION LEVELS.

20 The minimum levels that need to be detectable by a
 21 screening test are as follows:

- 22 A. marijuana metabolites, 100 ng/ml;
- 23 B. cocaine metabolites, 300 ng/ml;
- 24 C. opiate metabolites, 300 ng/ml;
- 25 D. phencyclidine, 25 ng/ml; and
- 26 E. amphetamines, 1,000 ng/ml.

27 4740.1080 THRESHOLD DETECTION LEVELS.

28 Threshold detection levels for confirmatory tests of drugs
 29 and drug metabolites defined in Minnesota Statutes, section
 30 152.02, and rules of the Board of Pharmacy are 1,000 ng/ml,
 31 except as listed in items A to K:

- 32 A. marijuana metabolite (delta-9
 33 tetrahydrocannabinol-9-carboxylic acid), 15 ng/ml;
- 34 B. cocaine, 150 ng/ml;
- 35 C. metabolite (benzoylecgonine), 150 ng/ml;

- B. C. opiates, 300-ng/ml*:
- (1) morphine, 300 ng/ml*; and
- (2) codeine, 300 ng/ml*;
- D. phencyclidine, 25 ng/ml;
- E. amphetamines, 500 ng/ml;
- F. fentanyl, 5 ng/ml;
- G. lysergic acid diethylamide (LSD), 5 ng/ml;
- H. 3-4-methylenedioxy amphetamine (MDA), 300
ng/ml;
- I. alcohol (urine), .02 gram percent; and
- J. alcohol (blood), .02 gram percent.

* 300 ng/ml individually or in combination.

4740.1090 VARIANCE AND WAIVERS.

A laboratory may request that the department grant a variance or waiver from the provisions of parts 4740.1000 to 4740.1080. A request for a variance or waiver must be submitted to the department in writing. A request must contain the following information:

A. the specific rules for which the variance or waiver is requested;

B. the reasons for the request;

C. the alternative measures that will be taken if a variance or waiver is granted; and

D. the length of time for which the variance or waiver is sought.

The commissioner shall review information submitted with the request for waiver or variance. If the laboratory proposes alternatives equivalent or superior to those prescribed in the rule and shows that strict enforcement of the rule would cause undue hardship, and the variance would not adversely affect public health or safety, the commissioner shall grant the variance, provided however the variance shall not conflict with statutory provisions. The commissioner shall provide the laboratory with a written decision that states the reasons for granting or denying the request for the variance.