## **DRUG FREE PROGRAM ADDENDUM (voluntary)**

Any drug-free workplace program being implemented by an employer that includes but is not limited to the following components, as applicable, <u>may</u> be eligible for an additional workers compensation insurance premium discount. Please complete the following and show each component to your workplace safety inspector.

A	written policy regarding the use of drugs in the workplace should include, at a minimum, the following:
	$\Box$ A statement of purpose concerning the protection of the employer's employees and guests.
	☐ A general statement concerning what conduct is prohibited.
	$\Box$ A statement concerning the employer's intent to comply with applicable federal and Delaware statutes and regulations.
	$\square$ A description of the employer's drug testing policy, if any, including but not limited to preemployment testing, reasonable suspicion testing, and post-incident testing.
	$\square$ A list of workplace-prohibited substances, which may include but is not limited to amphetamines, cannabinoids, cocaine, opiates, phencyclidine (PCP), and chemical derivatives.
	☐ Whether marijuana is a prohibited substance in the workplace.
	$\square$ A statement concerning the employer's policy that accounts for the use of prescription medications, including the employee's duty to notify any testing laboratory of such substances.
	$\Box$ A statement concerning the employer's policy on employee consumption of alcohol on premises, including the types of employer functions at which alcohol consumption is permitted and whether an employee is permitted to use alcohol on premise outside of the employees' normal working hours.
	$\square$ A listing of all employee drug testing procedures (if testing will occur), including but not limited to:
	<ul> <li>✓ whether the employer uses an independent laboratory, whether testing includes (or is limited to) urine testing.</li> <li>✓ the employee's right to refuse testing and the consequences for so doing.</li> <li>✓ whether an employee will be compensated for time spent testing.</li> <li>✓ whether the employer pays for the cost of the test</li> </ul>
	☐ A statement concerning the consequences that arise when an employee tests positive for drugs, both during a preemployment drug screening and for current employees, including whether the job applicant or current employee has a right to explain the positive drug test.
	$\square$ A statement of confidentiality of information and a method for ensuring and documenting that an applicant for employment and all current employees receive details of the employer's Drug-Free Program.
	$\square$ A copy of the employer's Drug-Free Workplace Poster, certified by the government agency or vendor of the employer's choice.
	☐ A description of the employer's Employee Assistance Program (EAP) or proof of resources available to employees such as drug and alcohol counseling services, and a list of treatment centers and a description of the employer's training program for both supervisors and employees that requires that the training must be completed within 30 days of start date as part of new employee orientation, and that describes how the employer documents that employees have completed this training.

CONTACT YOUR AGENT OR CARRIER TO DETERMINE IF YOU QUALIFY FOR AN ADDITIONAL PREMIUM DISCOUNT.