



DEPARTMENT OF PERSONNEL
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<http://dop.nv.gov>

MEMO PERD #60-08

October 21, 2008

TO: Department Directors
Division Administrators
Personnel Liaisons
Designees for Drug and Alcohol Information

FROM: Shelley Blotter, Interim Director
Department of Personnel

A handwritten signature in black ink, appearing to read "S Blotter".

SUBJECT: New Statewide Drug Testing Vendor – Request for Information

Effective January 1, 2009, the State of Nevada will be changing its contract provider for statewide drug testing. The new provider, Drug Free Workplaces, Inc., will be conducting statewide drug testing as outlined in the Department's Reasonable Suspicion and Pre-Employment Alcohol & Drug Testing program guide. The current contract provider, Quest Diagnostics, should continue to be used through December 31, 2008. In order for you to have a seamless transition to the new vendor on January 1, we need your assistance in gathering some important information.

For each agency, Drug Free Workplaces will require billing information and names of contacts for drug testing results notification. Drug Free Workplaces will send results of all drug tests via email and they will need two points of contact at each agency, a primary and secondary contact. Enclosed is a form for completion by each agency. Please complete and submit this form by interdepartmental mail to Renee Travis at the Department of Personnel or fax to 775-684-0124 no later than October 28, 2008. Please note that the individual you identify as your primary contact will be listed on the Department of Personnel's internal designee list of individuals who receive Drug and Alcohol information, unless otherwise indicated.

The primary uses for drug testing under this contract include pre-employment testing where the class/positions have been approved in accordance with NRS 284.4066, reasonable suspicion, and as otherwise outlined in NAC 284.888. While your agency may have a different contract for drug testing, you may still want to establish an account under this contract should the need arise for its use.

Drug Free Workplaces offers an additional feature for positions handling medications. They will provide affected agencies with two different chain-of-custody forms including one specific to positions handling medications. The test for those medical positions will involve a 9-panel drug testing profile at no additional cost. This 9-panel test (which includes the standard 5-panel test as outlined in the drug testing program also detects Barbiturates, Benzodiazepines, Methadone, and Propoxyphone). If you have positions that handle medications and wish to utilize this feature, please be sure to indicate as such on the attached form. Please note that this feature does not remove the ability for any agency to request testing beyond the standard 5-panel test for an additional fee.

Additionally, we are in the process of updating the Reasonable Suspicion and Pre-Employment Alcohol and Drug Testing Program to reflect these changes. This document will be updated and distributed later this year along with training for the Agency Representatives affected by these changes. Please mark your calendars with the following tentative training dates:

December 2, 2008	9:00 a.m. – 10:30 a.m.	Carson City – 209 E. Musser St. Room 100 (written testing room)	LV via Video conferencing 555 E. Washington Ave. Suite 1400 – conf room
December 16, 2008	10:00 a.m.– 11:30 a.m.	Carson City – 209 E. Musser St. Room 100 (written testing room)	LV via Video conferencing 555 E. Washington Ave. Suite 1400 – written testing room

The above listed training sessions will be available in NEATS for enrollment later this week. These training sessions will be listed under the course name: 2009 Drug Testing Vendor Update.

If you have questions, please direct them to Renee Travis at (775) 684-0111 rtravis@dop.nv.gov, or Mark Evans, (775) 684-0149 mevans@dop.nv.gov.

Drug Free Workplaces, Inc.
Nevada Agency Contact/Billing Information

(Numbers will be assigned by DFW)

Agency Name: _____

Drug Acct # _____

Physical Address: _____

LabCorp Alcohol # _____

Other Alcohol # _____

Phone: () _____ Fax: () _____

Agency Contacts who will receive confidential results:

NAME

Employee ID

1. _____ Email _____

2. _____ Email _____

Accts Payable Contact

If Different: _____ Email: _____ Phone: _____

Number of Employees: _____ Approximate percent of positions subject to drug testing? _____

Do you have any positions that handle medications? Yes No

Drug Free Workplaces, Inc., is authorized to receive all medical/billing information relative to this agency's drug free workplace program. All documents received by DFW are intended for use only by the above agency.

A reproduced version of this form shall have the same effect as the original.

_____ Date _____
Agency Representative Signature Title