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MPC DOT PHMSA Prohibited Drug and Alcohol Misuse Testing Plan (MPC-DOT-01691-PRS)

Marathon Petroleum Company LP

Document Owner: Steigauf, Jeff **Effective Date:** 04/29/2024

MPC DOT PHMSA Prohibited Drug and Alcohol Misuse Testing Plan (MPC-DOT-01691-PRS)

1.0 Overview

1.1 Purpose

The purpose of the Marathon Petroleum Company (MPC) DOT PHMSA Prohibited Drug and Alcohol Testing Plan is to reduce accidents that result from the use of prohibited drugs and alcohol, thereby reducing fatalities, injuries, and property damage.

This Plan supplements the Company's Drug and Alcohol Policy which contains additional provisions that also apply and govern your employment with the Company. This 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 Whenever this occurs, the affected portions of the Plan are specifically superseded.

A copy of this plan 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 and Receipt Notification Form (reference).

The Company must comply with all Pipeline and Hazardous Materials Safety Administration (PHMSA) regulations and other Department of Transportation (DOT) regulations which require affirmative actions to eliminate the impact of the misuse of alcohol and prohibited drugs in the workplace. 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 use of prohibited drugs and alcohol misuse by covered employees.

1.2 Scope

- PHMSA prohibits certain conduct by, and requires prohibited drug and alcohol
 testing of, persons who perform specified covered functions. Persons who
 violate these regulations will be subject to consequences, including removal
 from performing covered functions. In addition, the Company has established
 its own Drug and Alcohol Policy that includes provisions beyond those required
 by PHMSA.
- Persons performing PHMSA covered functions for the Company are covered employees subject to DOT/PHMSA prohibited drug and alcohol testing.
- Materials supplied to covered employees will also include information on additional Company mandated policies with respect to the use or possession of alcohol and unauthorized drugs, including any consequences for an employee found to have a prohibited blood alcohol level, that are based on the Company's authority independent of the federal regulations.

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Note: Written notice of the availability of this information is provided to representatives of employee organizations, relevant unions, and their business agents.

1.3 Contents

This document contains the following sections:

- 1.0 Overview
- 2.0 Roles and Responsibilities
- 3.0 Covered Employees and Covered Functions
- 4.0 Prohibited Conduct
- 5.0 Circumstances Requiring Testing
- 6.0 DOT Testing Versus Non-DOT Testing Provisions
- 7.0 Breath Alcohol Testing Procedures
- 8.0 Prohibited Drug Testing Procedures
- 9.0 Consequences for Violating the Plan
- 10.0 Disciplinary Actions
- 11.0 Records
- 12.0 Employee Assistance Program (EAP)
- 13.0 Training
- 14.0 Contractor Monitoring
- 15.0 Miscellaneous
- 16.0 Definitions
- Attachments
- References
- Variance Approval Guidelines
- **Additional Information**
- Revision History

2.0 Roles and Responsibilities

2.1 Corporate Drug and Alcohol Jeff Steigauf – HR Compliance Manager **Program**

The Corporate Drug and Alcohol Program Manager is:

539 South Main St Findlay, Ohio 45840

(419) 672-6367

(419) 072-0307	
Role	Responsibility
Program Manager	Shall be responsible for:
	 the preparation and execution of this prohibited drug and alcohol misuse plan which complies with requirements of the DOT regulations. 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.
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.

2.2 Company's Medical Review Officer (MRO)

The Company's MRO is:

Dr. Matthew Hughes

539 South Main St Findlay, Ohio 45840

(419) 421-2027

MPC's Talent Acquisition (TA) group also enlists HireRight LLC (HireRight) for pre-employment drug testing. HireRight's MRO is:

Dr. Todd Simo

7427 Matthews-Mint Hill Rd

Suite 105-297

Charlotte, NC 28227

(949) 246-9335

Role	Responsibility
MRO	 Is an independent and impartial 'gatekeeper' and advocate for the accuracy and integrity of the alcohol and prohibited drug testing process. Is responsible for all duties assigned by Department of Transportation (DOT) and Pipeline Hazardous Materials Safety Administration (PHMSA) regulations including, but not limited to: retention of all prohibited drug and alcohol test results. quality assurance reviews of testing process. the review and interpretation of confirmed positive results. oversees review of all tests and Custody and Control forms (CCF). determines whether there is justification for a test to be cancelled.

2.3 Corporate Health Services

Role	Responsibility
Corporate Health Services	 Is responsible for all covered employee testing in accordance with the regulations. Has developed a computer program that randomly selects individuals every month in compliance with PHMSA Random Testing regulations and ensures that employees are only in one DOT random testing pool. Note: Procedures for random selection have been distributed to all field locations.

2.4 Talent Acquisition

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Role	Responsibility

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Talent Acquisition	• Is responsible for identifying candidates that would perform covered functions and initiate the pre-employment activities, including the pre-employment drug
	screen and previous employer verifications.

2.5 Substance The SAP shall meet the applicable qualification requirements of 49 CFR 40 Abuse Professional (§40.281) and Part 199 (reference). (SAP)

The company uses ASAP as our provider for SAP's. ASAP 10151 York Road, Suite 120 Cockeysville, MD 21030 (888) 792-2727

Contact Company's Health Services organization for more information: call 419.421.3160 or email HealthServices@marathonpetroleum.com.

2.6 Designated Employer Representative (DER)

The following are the roles and responsibilities for the DERs:

Role	Responsibility
Company's Health Services Department Employees	Are the DERs for all matters involving employee testing procedures, records, and results.
Organization's Designated DOT DER	Is the DER for all matters pertaining to implementation of this plan and contact with individual employees.

Reference: MPC Designated Employee Representative (DER) List

2.7 Service Agent Public Interest Exclusion

The company will not use a service agent against whom a Public Interest Exclusion (PIE) has been issued. The company will stop using the services of a service agent no later than 90 days after the DOT has published the decision in the Federal Register or posted it on its website that a PIE has been issued. The company may apply to the Office of Drug and Alcohol Policy Compliance (ODAPC) Director for an extension of 30 days if it is demonstrated that a substitute service agent cannot be found within 90 days. [§40.409(b)]

Service agents must comply with all parts of <u>49 CFR 40 (§40.341-355)</u> (reference).

2.8 Designated Collection Sites

The following are the roles and responsibilities for the Designated Collection Sites:

Role	Responsibility

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Each Field Location	To have one or more designated collection sites which will have all necessary personnel, materials, equipment, facilities, and supervision to provide for the collection, security, temporary storage and shipping or transportation of urine specimens to the certified drug testing laboratory.
Local HR	 Is responsible for the designation, training, and monitoring of appropriate specimen collection sites. Will maintain a list of all available collection sites in their geographical area.
Specimen Analysis	Prohibited drug specimen analysis will be performed by: Lab Corp. Laboratories, Inc. (for DOT Urinalysis) P.O. Box 12652 1904 Alexander Dr. Research Triangle Park, NC 27709 Note: See the Drug and Alcohol Collection Standard - HLT-2015 (reference) for further details.

3.0 Covered Employees and Covered Functions

3.1 Covered Employee

A covered employee means a person who performs a covered function, including person employed by operators, contractors engaged by operators or persons employed by such contractors. Contractors are covered in Section 14.0 Contractor Monitoring. This D&A Plan covers Marathon covered employees.

3.2 Covered Functions

Covered functions are operations, maintenance, or emergency-response functions regulated by part 192, 193 or 195 that are performed on a pipeline or on an LNG facility. Examples of such functions are below, but the list is not all inclusive:

- Operations control the movement or storage of gas, LNG, hazardous or carbon dioxide – opening/closing valves, starting/stopping pumps, monitoring line conditions, reacting to abnormal operations.
- Maintenance preserve a pipeline or LNG facility for use inspecting, repairing, replacing pipe, pipeline or pipeline system components.
- Emergency Response for the purposes of a covered function, emergency response is limited to those emergency response functions that are performed on a pipeline – taking necessary actions, such as an emergency shutdown, valve closure, or pressure reduction – to minimize the volume of product released.

Note: A master list of all employees covered in the PHMSA pool is maintained by the Corporate Drug and Alcohol Program Manager.

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4.0 Prohibited Conduct

4.1 Prohibited Conduct

The following information refers to prohibited conduct.

What	Prohibited Conduct
Prohibited Drugs	Covered employees shall not use prohibited drugs.
Alcohol Concentration	Covered employees shall not report for duty or remain on duty in a position requiring the performance of covered functions while having an alcohol concentration of 0.04 or greater.
On-Duty Use	 Covered employees shall not consume alcohol while performing covered functions; this includes covered employees who are on-duty and need to be immediately available to perform covered functions. On-call covered employees who are not at work but could be called at any time to perform covered functions are subject to on-duty alcohol prohibitions.
Pre-Duty Use	 Covered employees shall not perform covered functions within four hours after consuming alcohol. Employees who have been notified to report for duty to respond to an emergency shall not use alcohol after being notified to report.
Alcohol Use After an Accident	Covered employees with knowledge of a reportable accident involving a pipeline for which they performed a covered function at or near the time of the accident shall 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 caused the accident or contributed to the severity of the accident.
Refusal to Submit to Testing	 Covered employees shall not refuse to submit to a required prohibited drug 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. Note: A refusal to sign an ATF is considered a refusal to submit to testing. Employees who do not provide sufficient urine or an adequate deep air sample for a required test will be referred for a medical examination. This examination is to indicate whether the employee has a medical problem relating to why they are unable to complete a DOT 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.

Note: Any employee who has engaged in prohibited conduct identified within this plan shall be advised of the resources to them in evaluating and resolving problems associated with the misuse of alcohol or prohibited drugs. This includes the names, addresses, and telephone numbers of substance abuse professionals and counseling and treatment programs.

5.0 Circumstances Requiring Testing

5.1 Pre-Employment

The following is an overview of pre-employment testing requirements. Covered employees are subject to the following federally mandated alcohol and prohibited drug tests:

Circumstance	What
Pre-Employment	Prohibited drug tests are required when an individual is either hired or transferred into a covered position.
	 Urine tests will be conducted prior to performing any DOT covered work. Further, all employees subject to Random Testing as described below, who are off of work in excess of 90-days must submit to pre-employment testing prior to return-to-duty.
Pre-Employment with Previous DOT Safety Sensitive Functions	The Company must, after obtaining the individual's written consent, obtain and review the information listed below from any DOT-regulated 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:
	 Information on the employee's alcohol test in which a breath alcohol concentration of 0.04 or greater was indicated. Information on the employee's prohibited drug test in which a positive result was indicated. Any refusal to submit to a required alcohol or prohibited drug test (including verified adulterated or substituted drug test results). Other violations of DOT agency drug and alcohol testing regulations; and 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.
	Note : The information must be obtained and reviewed no later than 30 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.

5.2 Post-Accident The following is an overview of post-accident testing requirements. Covered employees are subject to the following federally mandated prohibited drug and alcohol tests:

Circumstance	What
Post-Accident	As soon as practicable after an accident, the Company shall test each surviving covered employees whose performance of a covered function either contributed to the accident or cannot be completed discounted as a contributing factor to the accident itself or the severity of the accident. Any decision not to test a covered employee post-accident is based on specific information that the covered employee's performance has no role in the cause(s) or severity of the accident. This decision will be documented.
	Reference: Post Accident Drug and Alcohol Testing and Reasonable Suspicion Testing
	An employee who is subject to post-accident testing:
	 will be given instructions for obtaining drug and alcohol testing. must remain available for testing, or the Company shall consider the employee to have refused to submit to testing. must refrain from consuming alcohol for eight hours
	following the accident unless: they have been given a post-accident test, or the Company has determined that their performance could not have caused the accident or contributed to the severity of the accident.
	Note : Notwithstanding the previous statements, employees should seek and obtain emergency medical care whenever necessary.
	Attempts to conduct alcohol testing will cease eight hours after the accident, even if no alcohol test has been conducted.
	Attempts to conduct prohibited drug testing will cease 32 hours after the accident even if no prohibited drug testing has been conducted.
	 In the case of a conscious but hospitalized employee, the Company may request the hospital or medical facility to obtain the sample per the DOT and PHMSA testing requirements.

 If an employee is unconscious or otherwise unable to evidence consent to the procedure, the Company may request – but not require – the medical facility collect the sample.

The Company must:

- document all cases where required alcohol tests are not completed within two or eight hours of the accident and the reason the test was not completed.
- document all cased where required drug tests are not completed within 32 hours of the accident and the reason the test as not completed.

Reference: Post Accident Drug and Alcohol Testing and Reasonable Suspicion Testing

5.3 Reasonable Suspicion

The following is an overview of reasonable suspicion testing requirements. Covered employees are subject to the following federally mandated drug and alcohol tests:

Circumstance	What
Reasonable Suspicion	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 alcohol, or the Company has reasonable cause to believe the employee is using a prohibited drug.
	A covered employee must submit to prohibited drug and alcohol testing if determined that reasonable suspicion exists that the employee has violated drug and/or alcohol prohibitions.
	Determination to test a covered employee for prohibited drugs must be based on a reasonable and articulable belief that the employee is using a prohibited drug on the basis of specific, contemporaneous, physical, behavioral or performance indicators of probable drug use.
	At least two of the employee's supervisors, with at least one of whom is trained in detection of the possible symptoms of drug use, shall substantiate and concur in the decision to test an employee. The concurrence between two supervisors may be by telephone.
	Determination to test a covered employee for alcohol shall be based on specific, contemporaneous, articulable observations concerning the covered employee's appearance, behavior, speech, or body odors while the employee is performing covered functions, just before the

employee is performing covered functions, or just after the employee has ceased performing covered functions.

The required observations shall be made by a supervisor who is trained in detecting the symptoms of alcohol misuse.

The supervisor's observations that led to the "reasonable suspicion" determination shall be:

- documented on the <u>Post Accident Drug and Alcohol</u> <u>Testing and Reasonable Suspicion Testing</u> (reference), and
- in the case of prohibited drug tests, a second supervisor must substantiate and concur in the decision to test the employee.

Note: The supervisor who identifies a covered employee for reasonable suspicion testing cannot conduct the alcohol test as the breath alcohol technician for that employee.

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:

Prohibited Drug Test

• the results of the drug test are known.

Alcohol Test

- an alcohol test is administered and the employee's alcohol concentration measures less than .02; or
- 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.

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.
- not administered within eight hours of the determination, the Company shall cease all attempts to administer an alcohol test and state in the record the reasons for not administering the test.

5.4 Return-to-DutyIn situations where a covered employee who had engaged in prohibited conduct but was not terminated, they may not return-to-duty in a covered function until

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the covered employee has complied with applicable provisions of the SAP recommendations and the associated return-to-duty test.

The following is an overview of return-to-duty testing requirements. Covered employees are subject to the following federally mandated drug and/or alcohol tests:

Circumstance	What
Return-to-Duty	Before covered employee's return-to-duty in a covered function after engaging in prohibited conduct, they will undergo a return-to-duty test.
	All return-to-duty drug testing must be performed under direct observation.
	Employees cannot perform covered functions until a result indicating an alcohol concentration of less than 0.02 is obtained, and/or a negative prohibited drug screen.

5.5 Follow-Up

The following is an overview of follow-up testing requirements. Covered employees are subject to the following federally mandated drug and/or alcohol tests:

Circumstance	What
Follow-up – Drug Testing	Each covered employee who refuses to take or has a positive drug test shall be subject to unannounced follow-up drug tests following the covered employee's return to duty.
	All follow-up testing must be performed under direct observation.
	Follow-up testing:
	 shall consist of at least six tests in the first 12 months following the covered employee's return to duty. shall not exceed 60 months from the date of the employee's return to duty.
Circumstance	What
Follow-up – Alcohol Testing	Each covered employee that an SAP has determined needs assistance in resolving problems associated with alcohol misuse, the employee is subject to unannounced follow-up testing as directed by the SAP.
	Alcohol testing shall be conducted when the covered employee is performing covered functions, just before the employee is to perform covered functions, or just after the employee has ceased performing such functions.

5.6 Random

The following is an overview of random testing requirements. Covered employees are subject to the following federally mandated prohibited drug tests:

Circumstance	What

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Random	Random tests must be unannounced and the dates for random testing must be spread reasonably throughout the year.
	A computer program, Enterprise Health, has been developed to randomly select individuals every month in compliance with PHMSA regulations.
	 Individuals randomly selected will be notified by a Company supervisor and instructed to report immediately to the designated testing site.
	The Company will select covered employees for random testing on a monthly basis and will test at least the minimum percentage specified by PHMSA for the calendar year – usually 25% or 50%.

5.7 Retests

The following is an overview of retest requirements. Covered employees are subject to the following federally mandated alcohol tests:

Circumstance	What
Retests	The Company will first retest the employee if the Company chooses 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 employee may return to the covered function if: • 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.

5.8 Rehabilitation Provisions

1	Circumstance	What
	Rehabilitation Provisions: Required Referrals and Evaluation s	A covered employee who has been assessed by an SAP as needing treatment for prohibited drugs or alcohol misuse cannot perform any covered function unless and until that employee has:
		 been evaluated by a SAP to determine whether the employee is in need of assistance in resolving problems related to prohibited drug or alcohol 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. completed any treatment recommended by the SAP. been evaluated by an SAP to ensure that the employee has properly followed the treatment program.

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- The SAP must file a written report with the DER on the employee's treatment prior to return-to-duty.
 undergone a return-to-duty alcohol test with resulting
 - undergone a return-to-duty alcohol test with resulting alcohol concentration of less than .02.

6.0 DOT Testing Versus Non-DOT Testing Provisions

6.1 DOT vs Non-DOT

- DOT testing for either drugs or alcohol will be completely separate from any testing performed for non-DOT purposes. [§40.13]
- DOT tests will take priority and will be conducted and completed before a non-DOT test is begun.
- When conducting a urine DOT drug test, any excess urine left over from the DOT test must be discarded and a separate urine specimen must be collected for a subsequent non-DOT test.
- The Company will not perform any tests on DOT urine or breath specimens other than those specifically authorized by <u>49 CFR Part 40</u> (reference) or DOT agency regulations.
- No one is permitted to change or disregard the results of DOT tests based on the results of non-DOT tests. The Company will not disregard a verified breath test result because the employee presents a negative breath test result collected by the employee's physician or a DNA test result purporting to question the identity of the DOT specimen.
- The Company will not use the Custody Control Form (CCF) or the Alcohol Testing Form (ATF) in the non-DOT drug and alcohol testing program. This prohibition includes the use of the DOT forms with references to DOT programs and agencies crossed out. Non-DOT custody and control forms will be used for all non-DOT drug and alcohol tests.
- The Company will always use the CCF for all DOT-mandated drug tests and the ATF for all DOT-mandated alcohol tests. The words Department of Transportation appear at the top of each form.
- DOT drug and alcohol tests will only be conducted on an individual who is regulated under DOT as defined by PHMSA.

7.0 Breath Alcohol Testing Procedures

7.1 Breath Alcohol The Company may contract with medical facilities to conduct breath alcohol **Testing** testing.

A DOT Alcohol Testing Form (ATF) must be used for every DOT alcohol test. **Reference**: Alcohol Testing Form - Appendix G to Part 40

Only alcohol screening devices (ASDs) listed on the ODAPC's web page for "Approved Evidential Breath Measurement Devices" will be used for DOT alcohol

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testing. An ASD may be used for DOT alcohol screening tests only if there are instructions for its use in DOT testing. ASDs can only be used for screening tests for alcohol and must not be used for confirmation tests.

Only evidential breath testing (EBT) devices listed on the ODAPC's web page for "Approved Evidential Breath Measurement Devices" will be used for DOT confirmation alcohol testing. Any EBTs used for DOT required alcohol confirmation testing will have the following capabilities:

- 1. Provides a printed triplicate result (or three consecutive identical copies of a result) of each breath test.
- 2. Assigns a unique number of each completed test, which the BAT and employee can read before each test and which is printed on each copy of the result.
- 3. Prints, on each copy of the result, the manufacturer's name for the device, its serial number, and the time of the test.
- 4. Distinguishes alcohol from acetone at the 0.02 alcohol concentration level.
- 5. Tests an air blank.
- 6.Performs an external calibration check performed at the intervals specified in, and by methods specified by, the devise manufacturer's instructions.

The Breath Alcohol Technician (BAT)

- Ensures the integrity of the process by conducting all tests in accordance with the prescribed DOT regulations.
- Will be trained and certified in accordance with 49 CFR 40.213 (reference).
- Will ensure the use and care of the device according to requirements listed in 49 CFR 40.233 (reference).
- Will ensure the inspection, maintenance, and calibration of the EBTs are performed by its manufacturer's or appropriate state health or other state agency).

7.2 Breath Alcohol The following process outlines breath alcohol screening testing.

Screening Tests

Who	What
BAT	 Confirms the identity of employee to be tested and asks the employee to certify their participation in the testing process. Communicates the results confidentially to the employee and DER, and documents appropriately.
Employee	 If refuses to sign the participation certification, will be regarded as a refusal to take the test. Is required to provide a breath sample for analysis by blowing forcefully into a provided mouthpiece.

Tests

7.3 Confirmation 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 following process outlines confirmation testing.

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Who	What
BAT	 Conducts an "air blank" to ensure that the device is working correctly. Ensures confirmation test is conducted following the 15-minute waiting period. The confirmation test shall be conducted prior to 30 minutes following the completion of the screening test. Note: If the 30-minute time frame has passed since the screening test result was obtained, a confirmation test must still be completed (i.e., you cannot do another screening test in lieu of a confirmation test). Immediately communicates results of the test confidentially with the DER.
Employee	 Is instructed not to eat, drink, put any object or substance in their mouth, and, to the extent possible, not to belch during a waiting period before the confirmation test. If refuses to certify results, will be regarded as refusal to take the test.

7.4 Invalid Breath The following outlines an invalid breath alcohol test. Alcohol Test If the Th

If the	Then
 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) fails to print a confirmation test result display of the sequential test number or alcohol concentration is not the same as the sequential test number or alcohol concentration on the printed result 	The breath alcohol test is invalid.
 does not observe the minimum 15-minute waiting period prior to the confirmation test 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 does not sign the form 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 	

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8.0 Prohibited Drug Testing Procedures

8.1 Prohibited Drug Testing

Prohibited Drug testing is performed through analysis of a urine specimen.

DOT regulations require testing for, and only for, the following five prohibited drugs:

- Marijuana
- Cocaine
- Amphetamines
- Opioids
- Phencyclidine (PCP)

8.2 Safeguards

There are many safeguards required in order to protect covered employees including:

- detailed specimen collection procedures
- collection site requirements and security
- MRO 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
- integrity and identity of the specimen, and
- all laboratories that perform DOT drug testing must be certified by the Substance Abuse and Mental Health Services Administration.

Note: The laboratory must report laboratory results directly, and only, to the MRO at their place of business. In addition, the laboratory will transmit an aggregate statistical summary, by operator, of the drug test data listed in Part 40, Appendix B, at least semi-annually.

8.3 Prohibited Drug Testing Process

The specimen collection procedures and chain of custody ensure that the specimen's security, proper identification, and integrity are not compromised.

A DOT Chain of Custody form (CCF) for each specimen to be chemically tested shall be established and maintained from the time of specimen collection through the testing of the specimen.

The process outlined below begins when the covered employee provides a urine specimen at a collection site designated by the Company.

Who	What
Collection Site Personnel	Monitor procedures to ensure that the collection is performed properly
"Collector"	 Seals and labels the specimen(s). Completes a chain-of-custody document. Prepares the specimen and accompanying paperwork for shipment to a certified drug testing laboratory.

"Collector" (Urine Specimen Only)	• Splits urine specimen into two bottles labeled as a "A" and a "B" specimen.
	 Sends both bottles to the laboratory.
	Note : The DOT urine sample should not be used for a Non-
	DOT urine sample. A separate sample must be collected.

Notes:

- Only the primary specimen is opened and used for screening testing.
- Split specimen bottle remains sealed and stored at the laboratory.

8.4 Prohibited Drug Urine Testing Results

The following outlines the prohibited drug urine results.

All laboratory results are reported by the laboratory to the Company's MRO. Additional detail with respect to prohibited drug results is provided below.

Result	Action
Negative	The Company's MRO reviews and verifies the result prior to sending to DER and the testing is concluded.
Positive, Adulterated, Substituted, or Invalid	MRO performs review functions as required by the regulations prior to releasing the results to the DER. Note: The Company will not stand down an employee.
Positive	Confirmation test is performed by the laboratory using the gas chromatography/mass spectrometry technique.
Confirmed Positive (via the second	MRO performs review functions as required by the regulation.
confirmatory analysis of the primary specimen)	MRO shall make reasonable efforts to contact the employee (either in person or by telephone using the daytime and night phone numbers provided by employee of CCF) on a confidential basis over a 24-hour period to conduct an interview to determine if there is an alternative medical explanation for the prohibited drug found in the employee's urine specimen. (Reasonable efforts include, as a minimum, three attempts spaced reasonably over a 24-hour period. Date and times of the efforts made to contact the employee will be documented. If both day and night phone numbers listed on the CCF are incorrect (e.g., disconnected, wrong number), the MRO need not wait the full 24-hours to proceed.)
	If, after making all reasonable efforts and documenting them, the MRO is unable to reach the individual directly, the MRO shall contact the DER; The DER, using procedures that protect, as much as possible, the confidentiality of the MRO's request that the employee contact the MRO.
	If DER successfully contacts the employee:

- DER must document the date and time of contact and inform the MRO.
- Inform the employee they should contact the MRO immediately.
- Inform the employee of the consequences of failing to contact the MRO within the next 72 hours.

If DER is unable to contact the employee with a positive test result after making reasonable efforts (i.e., at least three attempts, spaced reasonable over a 24-hour period, at the day and night telephone numbers the employee listed on the CCF), the employer will place the employee on leave and thus they will not be permitted to return to work.

- DER must document the attempts to contact the employee.
- DER must leave a message for the employee by any practicable means to contact the MRO and document the date and time of this attempted contact.

If	Then
employee provides appropriate documentation and the MRO determines that it is legitimate medical use of the prohibited drug	The test result will be reported as negative to the Company.
the MRO determines that there is no valid medical reason for the prohibited drug	 MRO advises the DER that the employee was positive for an unauthorized prohibited drug employee will be immediately removed from the covered function following initial contact by the MRO to the DER; removal will not await the receipt of the written report or any split specimen test. MRO also advises the employee of their right to request, within 72 hours, a second test of the split urine sample.
the employee requests a second test of the split urine sample	The MRO must: • Document the date/time of the employee's request. • Immediately provide written notice to the laboratory that tested the primary specimen that

	the laboratory must forward the split specimen to a second HHS-certified laboratory.
Split sample "Reconfirms" initial test result	MRO must report to DER and employee that the results were reconfirmed.
	 If reconfirmed positive – final result is positive. If reconfirmed adulterated or substituted, final result is refusal to test. If reconfirmed result is a combination of positive and refusal to test, final result is both positive and refusal to test.
Split sample "Fails to Reconfirm" initial test result and no adulteration and/or substitution criteria were met	 MRO must report to the DER and employee that the test must be cancelled. MRO must inform ODAPC of the failure to reconfirm per Part 40. Evaluate conditions and determine if DER must ensure the immediate collection of another sample under direct observation.
Split sample "Fails to Reconfirm" initial test results and split sample was reported as invalid	 MRO must report to DER and the employee that the test must be cancelled and the reason for cancellation. MRO must direct DER to ensure the immediate collection of another specimen from the employee under direct observation with no notice to employee of this collection requirement until immediately before the collection.
Split sample "Fails to Reconfirm" initial test results and split sample was reported as adulterated and/or substituted	 MRO must contact employee and inform employee that lab has determined the split sample was adulterated and/or substituted. Follow procedures to determine if there is a legitimate medical explanation for the laboratory

	finding of adulteration and/or substitution. If MRO determines there is a legitimate medical explanation, report to DER and employee that the test must be cancelled; inform ODAPC of the failure to confirm per Part 40. If MRO determines no legitimate medical explanation: Report to DER and employee that result is verified as a refusal to test. Employee has 72 hours to request primary specimen to see if same criterion were present in it. If test of primary specimen reconfirms adulteration and/or substitution finding, MRO must report the as a refusal to test. If the test of primary specimen fails to reconfirm the adulteration and/or substitution finding of the split specimen, the MRO must cancel the test and follow the process 40.191(b).
Split sample failed to reconfirm one or more but not all the primary specimen results, and split specimen was adulterated and/or substituted	 MRO must: Report the split was also reported as being invalid, adulterated and/or substituted. Inform the DER to take action on the reconfirmed results.
Split sample was not available for testing or there was no split laboratory available to test the specimen	 MRO must: Report to DER and the employee that the test must be cancelled and the reason for the cancellation. Direct the DER to ensure the immediate recollection of another specimen from the employee under direct observation, with no notice given to the employee of this collection requirement until immediately before collection.

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	Notify ODAPC of the failure to confirm per Part 40.
All Results	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.

9.0 Consequences for Violating the Plan

Covered Duties

9.1 Removal from 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 prohibited drug rules (including refusal to submit to testing or having an adulterated or substituted urine specimen).

9.2 Required **Evaluations and Testing**

The following outlines breath alcohol concentration and positive prohibited drug test required evaluations and testing

If the concentration level is	Then
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.
0.04 or greater or positive drug test	A covered employee who has violated the rules on prohibited drug or alcohol misuse cannot perform any covered function unless and until that employee has
	 been evaluated by a SAP to determine whether the employee is in need of assistance in resolving problems related to prohibited drug and alcohol 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. completed any treatment recommended by the SAP.
	 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. undergone required return-to-duty testing.

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10.0 Disciplinary Actions

10.1 Disciplinary Actions

Any covered employee who has engaged in prohibited conduct identified within this plan shall:

- Be advised of the resources to them in evaluating and resolving problems associated with the misuse of alcohol or substance abuse. This includes the names, addresses, and telephone numbers of substance abuse professionals and counseling and treatment programs.
- Be removed from performing the covered function and will be discharged or, if alternative to discharge is required by applicable state law, the employee will be offered the procedure necessary to avoid discharge as set forth below in accordance with 49 CFR Part 199:
- Both alcohol and prohibited drugs
 - Been considered by the MRO in accordance with DOT Procedures and been determined by an SAP to have successfully completed required education or treatment (199.103).
- For prohibited drugs
 - Has not failed a drug test required by this plan after returning to duty (199.103).
- For alcohol
 - Has undergone a return-to-duty alcohol test with a result indicating an alcohol concentration of less than 0.02 and be subject to unannounced follow-up alcohol tests as determined by the SAP, but shall consist of at least six tests in the first 12 months following the employee's return to duty.
 - Follow up testing may include testing for prohibited drugs if directed by the SAP in accordance with 49 CFR Part 40.

11.0 Records

11.1 Employee Records

Employee records pertaining to testing will be maintained in a secure location with controlled access. The records will not be made a part of the employee's personnel file.

- A covered employee is entitled, upon written request to an MRO or service agent, to obtain copies of any records pertaining to the employee's use of alcohol, including any records pertaining to their DOT-mandated drug and/or alcohol tests.
 - The MRO or service agent must provide the requested records within 10 business days.
 - Access to an employee's records shall not be contingent upon payment for records other than those specifically requested.
- A covered employee is entitled, upon written request to a SAP, a copy of all SAP reports; however, any follow-up testing information from the report will be redacted before being provided to the employee.
- The Company shall permit access to all facilities utilized in complying with the drug and alcohol requirements of 49 CFR Parts 199 and 40 (reference) to

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the Secretary of Transportation or any DOT or state agency with regulatory authority over the Company.

- The records will only be released to the
 - o employee or a person identified by the employee (including subsequent employers), at the written request of the employee.
 - Secretary of Transportation, any DOT agency, or a representative of a state agency with a regulatory authority over the Company.
 - National Transportation Safety Board when requested as part of an accident investigation.
 - 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.

11.2 Requests for DOT Drug and Alcohol Testing Records from Previous Employers The release of information under this section will be in any written form (fax, e-mail, letter) that ensures confidentiality.

As the previous employer, the Company will maintain a written record of the information released, including the date, the party to whom it was released, and a summary of the information provided.

Who	What
Company	 Will, 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. Will not permit the employee to perform safety- sensitive functions, unless the Company has obtained or made and documented a good faith effort to obtain the following information: Information on the employee's alcohol test in which a breath alcohol concentration of 0.04 or greater was indicated. Information on the employee's prohibited drug test in which a positive result was indicated. Any refusal to submit to a required prohibited drug or alcohol test (including verified adulterated or substituted drug test results) Other violations of DOT agency drug and alcohol testing regulations; and 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. If the previous company does not have information about the return-to-duty process (e.g., a company who did not hire an employee who tested positive on a pre-employment test), the Company must seek to obtain this information from the employee. Will obtain and review the information no later than 30 days after the employee first performs covered functions.

- Every effort will be made to obtain this information before the employee performs safety-sensitive functions. The Company will not permit the employee to perform safetysensitive functions, unless the Company has obtained or made and documented a good faith effort to obtain this information.
- Will maintain a written, confidential record of the information the Company obtained or of the good faith efforts the Company made to obtain the information.
- Will retain the information for three years from the date of the employee's first performance of DOT safety- sensitive covered duties for the Company.

Will ask the employee whether they have tested positive, or refused to test, on any pre-employment drug or alcohol test administered by a company to which the employee applied for, but did not obtain, DOT safety-sensitive transportation work covered by DOT agency drug and alcohol testing rules during the past two years.

 If the employee admits that they had a positive test or a refusal to test, the Company will not use the employee to perform safety-sensitive functions for the Company, until and unless the employee documents successful completion of the return-to-duty process.

11.3 Records Retention

The Company will ensure that all records required by the DOT are maintained in a secure location with controlled access to protect confidentiality of the employees' information.

- A service agent may maintain these records for the Company. However, the service agent must ensure that the records can be produced at the Company's principal place of business in the time required by the DOT agency.
- If the Company stores records electronically, where permitted by 49 CFR Part 40 (reference), the Company will ensure that the records are easily accessible, legible, and formatted and stored in an organized manner.
- Statistical data related to drug testing and rehabilitation that is not namespecific and training records will be made available to the Administrator or the representative of a state agency upon request.
- Name-specific data will be provided at the company's principal place of business.

The following types of records will be maintained for the specified time periods:

Time Period	Records
One (1) year	The Company will keep the following records:
	• Records of employee prohibited test results that show employees passed; or cancelled drug test results. [§40.333 (a)(4) and 199.117 (a)(1)]

	• Records of alcohol test results below 0.02 [as defined in 49 CFR Part 40].
Two (2) Years	The Company will keep the following records:
	 Records related to the alcohol collection process (except calibration of evidential testing devices) Records related to the Quality Assurance Plan (QAP) for each EBT used for alcohol testing including, inspection, maintenance, and calibration of EBTs, i.e. collection logbooks if used, calibration documentation for evidential breath testing devices, and documentation of breath alcohol technician training and proficiency testing. Documents verifying existences of a medical explanation of the inability of an employee to provide adequate breath for testing.
Three	The local HR office will maintain the following records:
(3) Years	 Documents generated in connection with decisions to administer reasonable suspicion alcohol tests. Documents generated in connection with decisions not/or to administer post-accident tests. Information obtained from previous employers under §40.25 concerning drug and alcohol test results of employees; as well as Documentation of the employee's successful completion of return-to-duty requirements and documentation of requests to obtain this information. Maintained for three years from the date of the employee's first performance of DOT safety-sensitive covered duties for the Company. Information this Company provided to a prospective employer under the §40.25 drug and alcohol test results of previous employees.
	The Company will keep the following records:
	Records that demonstrate the collection process conforms to required regulations.
	HR will keep the following training records in the online Learning Management System (LMS):
	 Records related to reasonable suspicion supervisor training confirming supervisors have been trained. Records related to employee training confirming employees have been trained.
Five (5) Years	Corporate Health Services will maintain the following records:

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 Documentation pertaining to any missed tests (e.g. postaccident or reasonable suspicion that could not be conducted within the prescribed time frame).

The Company will keep the following records:

- Records of employee alcohol test results indicating an alcohol concentration of 0.02 or greater.
- Records of the number of employees tested for prohibited drugs, by the type of test (e.g. post- accident).
- Records of verified positive drug test results, and the type of test failed (e.g. post- accident), and records that demonstrate rehabilitations, if any.
- Calibration documentation of each EBT used in alcohol testing, including records of the results of external calibration checks.
- For employees who failed a drug test:
 - record of the functions performed by the employee (maintained by HR)
 - o the prohibited drugs which were used by the employee
 - the disposition of the employee who failed the test (maintained by HR) (e.g. termination, rehabilitation, leave without pay), and
 - o the age of each employee who failed the test.
- Documentation of refusals to take required alcohol and/or drug tests (including substitution and adulterated drug test results).
- Substance Abuse Professional (SAP) Reports, including demonstration of compliance with SAP recommendations from their date of receipt by the Company.
- Employee referrals and evaluations.
- Follow-up tests and testing schedule provided by the SAP for follow-up tests.
- Management Information Systems (MIS) testing data records.
- The Company will also be responsible for producing an annual summary report which includes the following information:
 - o total number of drug tests by type of test
 - total number of positive tests by type of test and substance category
- o disposition of individuals testing positive
- o total number of positive tests
- o total number of verified positives (confirmation GC/MS).

11.4 MIS Reports MPC will submit drug and alcohol testing data to PHMSA, and any state that for MPC Covered requires it, annually for covered employees.

Employees

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Note: Beginning in 2023, Oklahoma requires an annual submission (OAC 165:20-11-2). A copy of the DAMIS submission can be emailed to trpipelinesafety@occ.ok.gov.

Who	What
Health Services	 Gather PHMSA-covered employee testing data required for MIS report. Review this data with HR Compliance and Regulatory Compliance.
HR Compliance	 Reviews data gathered by Health Services with Health Services and Regulatory Compliance. Certifies Marathon's PHMSA MIS Report.
Regulatory Compliance	 Obtains DAMIS username and password. Receives MIS data from Health Services. Reviews data with Health Services and HR Compliance. Enters data into the DAMIS system. After HR Compliance certifies Marathon's PHMSA MIS Report, submits report in DAMIS system.

for Contractors

11.5 MIS Reports MPC partners with third-party compliance organizations [e.g., National Compliance Management Service (NCMS)] to ensure contractor compliance with DOT regulations, including the annual submission of drug and alcohol testing in accordance with Part 199.

12.0 Employee Assistance Program (EAP)

12.1 Available Methods

Available methods of evaluating and resolving problems associated with alcohol and drug abuse are listed as follows:

- Outpatient programs exist in a variety of settings:
 - o Community mental health centers
 - o Family service agencies
 - o Private physicians' and therapists' offices
 - Occupational settings
 - Specialized treatment facilities
- 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.
- Your local phone directory will list referral organizations such as
 - Local council on alcoholism
 - Alcoholics Anonymous
 - o Community alcoholism or mental health clinic
 - Social services, and

- County medical society.
- Information on the locations of substance abuse professionals are available from the Company's EAP.

12.2 Company's EAP General Information

In compliance with DOT regulations the Company has developed an EAP that will provide educational materials on drug and alcohol misuse to all covered employees.

MPC has established the Marathon Petroleum EAP which is a program designed to offer a professional, confidential source of help for employees and their dependents who may want to seek assistance with personal problems.

The EAP provides employees and their dependents with a broad range of services, including:

- Face-to-face counseling services
- Work/Life referral services, and
- Online resources, including child, elder care, and legal/financial services.

These services provide employees and their household members with comprehensive work/life and EAP counseling, education, and referral services. All of the resources provided by the EAP are professional and confidential and are designed to help resolve personal problems and issues before they negatively affect one's health, relationships with others or job performance.

12.3 EAP Counseling Benefits

Marathon Petroleum has retained the services of Anthem EAP. Anthem EAP counselors, who are experienced in addressing the wide variety of problems and concerns that individuals can face in everyday life, are available to help 24 hours per day, seven days per week. Some of the types of issues and concerns addressed by the EAP include:

- Family/Marital
- Parenting
- Legal
- Alcohol and Drug Abuse
- Emotional
- Stress
- Anxiety
- Depression
- Physical
- Financial
- Child Care/Elder Care

Note: The EAP will not intervene between an employee and their supervisor for work-related problems. The EAP does not supplant any established Company policies and procedures regarding work performance, behavior, or mandated compliance with the Drug and Alcohol Policy. Also, an employee's participation in the EAP does not exempt or shield them from compliance with established

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Company policies and procedures regarding work performance or behavior, and mandated compliance with the Drug and Alcohol Policy.

The EAP provides:

- Confidential Services
- Assessment
- Professional Counseling
- Education
- Referral Assistance (if needed)
- Follow-up

12.4 EAP Process The following outlines the EAP process.

Who	What
Eligible Employees and Household Members	 May contact the EAP service 24 hours per day, seven days per week by calling: 1.800.865.1044 if in the United States, or 858.571.8222 if located outside of the United States
Anthem EAP Service Counselor	 Speaks with the caller discusses the caller's needs, and assists in arranging an appointment with a counselor who is a part of the Anthem EAP network of EAP counselors. Note: Anthem EAP may provide the names of more than one available EAP counselor.
Eligible Employees and Household Members	Notify Anthem of which EAP counselor is ultimately chosen.
Anthem EAP	Contacts the chosen EAP counselor to authorize your EAP visits.

Note: Eligible employees and household members are eligible for up to eight counseling sessions (over the telephone or one-on-one with a counselor) per individual per problem or concern per year.

12.5 EAP Online

<u>Anthem EAP</u> (reference) provides 24 hours a day online linkage to educational information including stress, eating disorders, depression, and alcohol and drug abuse, and tip sheets on topics of interest. The website provides self-assessment tools that can be used to evaluate and create action plans based on health issues, depression, and family stress.

<u>www.AnthemEAP.com</u> is accessible online through MPC Connect and also from home by using http://www.anthemeap.com. You do not need to register to use this web site. Your company name is Marathon Petroleum.

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13.0 Training

13.1 Company Supervisors Training

- 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 drug 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, and
 - include 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 or in the online LMS.

13.2 Employee Training

- All employees will be provided with educational material on drug and alcohol 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 Plan and its Employee Assistance Program will be reviewed.

14.0 Contractor Monitoring

14.1 Contractor Monitoring

- The Company is required to ensure that all contractors used by the Company have prohibited drug and alcohol misuse plans in compliance with PHMSA and DOT regulations.
- The Company utilized a third party to evaluate the drug and alcohol programs of contractors for compliance with PHMSA and DOT regulations.

15.0 Miscellaneous

15.1 Intervening Intervening when a drug or alcohol problem is suspected, including confrontation, When a Problem is referral program, and/or referral to management.

Suspected

- Why You Should Get Involved:
 - Substance abuse is recognized as a problem throughout America, across all industries and occupations.
 - There are three good reasons why you should be concerned if any of your coworkers are using drugs or alcohol on the job:
 - Your health and safety may be at risk.

- Substance abuse costs you money.
- Substance abuse creates a negative work environment.
- According to the National Institute on Alcohol Abuse and Alcoholism, drug 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, drug and alcohol use on the job costs you and your fellow workers.
- 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.
- 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.
- No matter what your position in the organization, there is something you can
 do to ensure that drug 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.

15.2 Effects on Effects of drug and alcohol misuse on an individual's health, work, and personal Health, Work, and life: Personal Life

- 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.
- Long-term overuse of alcohol can cause liver damage, heart problems, sexual dysfunction, and other serious medical problems.
- 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.
- Workers who use drugs and/or alcohol affect everyone. Studies show that compared to alcohol- and drug-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.
- 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.
- 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.
- If substance abuse affects your work life, it could lead to job loss and all the financial problems that would follow.
- There are numerous signs of illegal drug use. For example, when a person is carrying drugs or has them hidden around the house, there is a strong possibility of use. Obviously, possession of drug paraphernalia is also a likely sign of use.

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- Indications of prescription drug misuse vary according to the type of substance in question. Substance misuse may lead to dependence and withdrawal symptoms can be severe if substance use is stopped suddenly.
- Certain additional behavioral characteristics also seem to accompany the use of alcohol and other drugs. The clues can be found in all people who abuse these substances, regardless of age. Examples of these clues include:
 - o an abrupt change in mood or attitudes
 - o impaired relationships with family members or friends
 - o unusual temper flare-ups
 - o increased borrowing of money from parents or friends
 - o stealing from the home, at school, or in the workplace
 - o heightened secrecy about actions and possessions, and
 - association with a new group of friends, especially with those who use drugs or alcohol.

15.3 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.

15.4 Signs and Symptoms of a Drug Problem

Drugs can show their effects in many different ways. Some of the most noticeable signs include:

- 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 drug paraphernalia.

16.0 Definitions

Accident	PHMSA uses the term <i>accident</i> in Part 199 to encompass both the definition of an incident reportable under Part 191 involving gas pipeline facilities or LNG facilities, or an accident reportable under Part 195 involving hazardous liquid pipeline facility. The term Accident in this plan also encompasses both.
Adulteration	The act of intentionally attempting to alter the results of a drug or alcohol test by means of sample substitution or by changing the chemical structure of a collected sample.
Air Bank	A reading by an evidential breath testing device (EBT) of ambient air containing no alcohol.
Alcohol	The intoxicating agent in beverage alcohol, ethyl alcohol or other low molecular weight alcohols including methyl or isopropyl alcohol.
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.
Alcohol Screening Device (ASD)	An ASD approved by the Office of Drug and Alcohol Policy Compliance (ODAPC) for DOT alcohol screening tests.
Alcohol Testing Form (ATF)	The form used for every DOT alcohol test.
Alcohol Use	The consumption of any beverage, mixture, or preparation, including any medication, containing alcohol.
Breath Alcohol Technician (BAT)	An individual who instructs and assists individuals in the alcohol testing process and operates an evidential breath testing device. The Breath Alcohol Technician must be certified and trained on the instrument he/she will be using for testing.
Collector	A person who instructs and assists employees at a collection site who receives and makes an initial inspection of the specimen (breath, saliva and/or urine sample) provided by those donors and who initiates and completes the CCF.

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Company

"Company" shall mean Marathon Petroleum Company LP, Marathon Petroleum Logistics Services and any subsidiary or affiliated organization which expressly adopts this Policy.

Confirmation Test A subsequent test using an EBT, following a screening test with a result of 0.02 (alcohol) or greater, that provides quantitative data about the alcohol concentration.

Confirmation Test A second analytical procedure performed on a different aliquot of the original specimen to identify and quantify a specific drug or drug metabolite. (drug)

Covered Employee A person who performs a covered function. Such person could be employed directly by the Company, or by a contractor engaged by the Company.

(safety-sensitive function)

Covered Function An operation, maintenance, or emergency-response function regulated by Part 192, 193 or 195 that is performed on a pipeline or on an LNG facility.

Custody and Control Form (CCF)

The form upon which the handling of urine samples are documented.

Department of **Transportation** (DOT)

The U.S. Government agency which regulates transportation, including the procedures for transportation workplace drug and alcohol testing programs.

Designated Employer Representative (DER)

An employee authorized by the employer to take immediate action(s) to remove employees from safety-sensitive duties, or cause employees to be removed from these covered duties, and to make required decisions in the testing and evaluation processes. The DER also receives test results and other communications for the employer, consistent with the requirements of DOT regulations.

Direct Observation

The process by which the collector or an observer accompanies the donor into the stall/toilet area and observes the act of urination.

Drugs

Drugs/Prohibited For the purposes of this plan, references to drugs or prohibited drugs are any of the substances specified in 49 CFR Part 40: Any of the following drugs: Cocaine, Marijuana, Opioids, Amphetamines, and Phencyclidine (PCP).

Employee

Any Marathon employee, including full-time, part-time, student co-op, intern, casual or seasonal.

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Evidential Breath An EBT approved by the Office of Drug and Alcohol Policy Compliance (Compliance (Com	
Federal Aviation Administration (FAA)	The U.S. government agency which regulates drug and alcohol testing for certification of pilots who are licensed in the United States.
Federal Motor Carrier Safety Administration (FMCSA)	The U.S. Government agency which regulates drug and alcohol testing requirements for carriers and commercial motor vehicle drivers.
Follow-up Testing	Testing required by DOT regulations to be conducted after an employee has returned to duty in a covered function after their return-to-duty test.
Insufficient Quantity	The lack of an adequate sample required to accurately conduct the drug and/or alcohol test. This includes urine, breath, or saliva.
Laboratory	Any U.S. laboratory certified by HHS under the National Laboratory Certification Program as meeting the minimum standards set by HHS; or, in the case of foreign laboratories, a laboratory approved for participation by DOT under this part.
Medical Review Officer (MRO)	A person who is a licensed physician and is responsible for receiving and reviewing laboratory results generated by the drug testing program and evaluating medical explanations for certain drug test results and meets all the requirements of 49 CFR 40 (§40.121) (reference).
Operator	An owner or operator of pipeline facilities.
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.
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.
Pipeline and Hazardous Materials Safety	The U.S. Government agency responsible for establishing the drug and alcohol requirements for operators and employees working in the pipeline industry.

Administration (PHMSA)

(PHMSA)	
Pipeline Facilities	New and existing pipeline, rights-of-way, and any equipment, facility, or building used in the transportation of product per Part 191 and 195.
Post-Accident Testing	Drug and alcohol testing required by PHMSA regulations to be conducted on a covered employee if the employee's performance of a covered function either contributed to the accident or cannot be completely discounted as a contributing factor to the accident.
Random Testing	Drug testing required by DOT regulations to be conducted unannounced on a selected covered employee who has an equal chance of being selected for testing as other covered employees.
Reasonable Suspicion Testing	Drug and alcohol testing required by drug testing conducted based on direct observation of signs/symptoms of drug/alcohol use.
Refusal to Submit Alcohol Test	Behavior consistent with DOT Procedures concerning refusal to take a drug test or refusal to take an alcohol test.
Refusal to Submit 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.
Return-to-Duty	A specific testing program under DOT for employee's subject to FMCSA, PHMSA and USCG regulations and who are returning to work following a drug and alcohol treatment program as a result of a positive test.
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.
Screening Test / (or Controlled Substance Test)	An immunoassay screen to eliminate "negative" urine specimens from further analysis.
Split Specimen	In drug testing, a part of the urine specimen that is sent to a first laboratory and retained unopened, and which is transported to a second laboratory in the event that the employee requests that it be tested following a verified positive test of the primary specimen or a verified adulterated or substituted test result.

Split Specimen Collection	A collection in which the urine collected is divided into two separate specimen bottles, the primary specimen (Bottle A) and the split specimen (Bottle B).
State Agency	An agency of any of the several states, the District of Columbia, or Puerto Rico that participates under the pipeline safety laws (49 U.S.C. 60101 <i>et seq.</i>)
	A person who evaluates employees who have violated a DOT drug and alcohol regulation and makes recommendations concerning education, treatment, follow-up testing, and aftercare.
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.

Attachments

Information Related to DOT PHMSA Prohibited Drug	Attachment - Information Related to DOT PHMSA Prohibited Drug and Alcohol Misuse Testing Plan
and Alcohol Misuse Testing	
Plan	

References

49 CFR Part 40	Regulatory Citation - Department of Transportation - PROCEDURES FOR TRANSPORTATION WORKPLACE DRUG AND ALCOHOL TESTING PROGRAMS - 49 CFR 40
49 CFR Part 199	Regulatory Citation - Pipeline and Hazardous Materials Safety Administration - DRUG AND ALCOHOL TESTING - 49 CFR Part 199
Acknowledgement and Receipt Notification Form	SharePoint - Acknowledgement and Receipt Notification Form - MPC HR Compliance
Alcohol Testing Form	External Reference - Alcohol Testing Form - Appendix G to Part 40

Anthem EAP	External Reference - Anthem EAP	
D&A Policy Employee Guide - California	SharePoint - D&A Policy Employee Guide - California	
D&A Policy Employee Guide - Minnesota	SharePoint - D&A Policy Employee Guide - Minnesota	
D&A Policy Employee Guide - MPC	SharePoint - D&A Policy Employee Guide - MPC	
Drug and Alcohol Collection Standard	MPC Standard - <u>Drug and Alcohol Standard</u> - HLT-2015	
LS - Requesting a Variance for an LS Governing Document	eDoc Document - <u>LS - Requesting a Variance for an LS Governing Document</u> - LNS-GEN-00262-PRS	
MPC Designated Employee Representative (DER) List	SharePoint - MPC Designated Employee Representative (DER) List - HR Compliance	
MPL - Operator Qualification Program	eDoc Document - MPL - Operator Qualification Program - MPL-OPR-01797-PRS	
OQ Task Assistan	t Application Link - OQ Task Assistant	
Post-Accident Drug and Alcohol Testing and	SharePoint - Post-Accident Drug and Alcohol Testing and Reasonable Suspicion Testing Supervisor Written Record - HR Compliance and EEO	

Variance Approval Guidelines

eDoc

Reasonable Suspicion Testing

Supervisor Written Record

The HR Compliance Manager (51108347), or designee, may grant variances to this document. Refer to <u>LS - Requesting a Variance for an LS Governing</u>

<u>Document - LNS-GEN-00262-PRS</u> (reference) for submitting variances in eDoc.

If a variance request cannot be submitted through eDoc, verbal approval may be granted at the discretion of the HR Compliance Manager (51108347) in time sensitive situations with the expectation that the verbal approval is followed-up immediately with an eDoc variance submission.

Note: Approved variances are posted to the top of this document.

Additional Information

Owner and ReviewThe following information applies to this document:

Cycle

• Owner Title: HR Compliance Manager

• Owner Org Code:51108347

• Subject Matter Experts: J. Rader, N. Walters, R. Sakr

• Review Cycle: 12 months

Note: Contact Governing Documents for additional reports.

Revision History

Revision History Table

Revision History The table below provides the revision history for this document.

No.	Date	Description
9	04/25/2024	Major Change: Document rewrite. Note: Contact Governing Documents for a copy of redline changes if needed.
8	07/17/2023	 Major Change: 7.1 Breath Alcohol Testing: Updated bullets under BAT 7.3 Confirmation Tests: Added the word <i>Immediately</i> in front of communicates Attachment: Under 49CFR Part 191.3 (1)(b) changed \$50,000 to \$122,000
7b	06/27/2023	Minor Change: Replaced SP link with published eDoc MPL-OPR-01797-PRS
7a	04/13/2023	Minor Change: Added the word <i>of</i> to the Date and times sentence.
7	03/21/2023	Major Change: Updated sections 7.3 and 8.4 to better align language with the regulation.
6b	01/24/2023	Minor Change: Added the word <i>Petroleum</i> to 12.5 EAP Online
6a	01/06/2023	Minor Change:

No.	Date	Description
		Reformatted 11.4Updated DER link
6	12/15/2022	Major Change: Updated all of section 11.4 (MIS Reports) to align language with process.
5	11/30/2022	 Major Change: 1.2 Scope: Updated 3rd bullet (This plan applies to all DOT) 3.1 Covered Positions: Removed note under 3rd bullet 4.1 Prohibited Conduct: Added note under table 5.2 Post-Accident: Added language to first What (Any decision not to test) 7.1 Breath Alcohol Testing: Added to end of note (Any EBTs used for DOT) 8.2 Safeguards: Added to end of note (In, addition, you will transmit) 11.4 MIS Reports: Added required states information Removed and updated links where applicable
4	02/03/2022	 Additional Information: Replaced T. Adams with J. Rader Major Change: 8.4 Controlled Substance Urine Testing Results: Removed prior to the DER being informed of a confirmed positive test in accordance with 49 CFR 40.21
3a	01/14/2022	Minor Change: Updated D&A Policy and Post-Accident links from TeamView to SharePoint
3	12/16/2021	 Major Change: 2.4 SAP: Added ASAP adrs 2.6 Service Agent: Added Service agents must comply and Limitations of service agents sentences 5.2 Post-Accident: Removed MRO from annually submit to PHMSA records bullet 5.3 Reasonable Suspicion: Removed bold and underline from an employee will not be permitted to return to work until resultsnote. Removed MRO from must annually submit to PHMSA recordsbullet. 5.5 Follow-Up: Added All follow-up testing must be performed under direct observation 11.3 Records: Added Names-specific data bullet. Replaced MRO with Company. 14.1 Contractor Monitoring: Removed TPA from a designated third party bullet Definitions: Accident: added gas from an UNGSF and changed \$50,000 to \$122,000 Blood Alcohol: bolded and underlined

No.	Date	Description
		MRO: Added 49 CFR (§40.121) Attachment: Updated
2	11/30/2021	Major Change:
		 2.2 MRO: Added quality assurance reviews, oversees review of all tests, and determines justification for a test bullets. Deleted Medical Director's Office 2.3 Corporate Health Services: New subsection 2.4 SAP: Updated note 2.5 DER: Added note 2.7 Designated Collection Sites: Updated adrs 5.4 Return to Duty: Added All return to duty sentence 5.6 Random: Added Random tests bullet 7.2 Breath and Alcohol Screening Tests and 7.3 Confirmation Tests: Added DER 8.1 Controlled Substances: Added note 8.2 Safeguards: Added MRO and note 8.4 Controlled Substance Urine Testing Results: For negative, added for review and verification prior to sending to DER 11.4 MIS Reports: Added note 14.1 Contractor Monitoring: Removed NCMS and added designated third party References: Added MPC DER List Additional Info: Removed J. Boggs
1	10/20/2021	New Document