

MAJOR LEAGUE BASEBALL

May 15, 1997

TO: ALL MAJOR LEAGUE CLUBS

RE: BASEBALL'S DRUG POLICY AND PREVENTION PROGRAM

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INTRODUCTION

This memorandum sets forth Baseball's drug policy and the principal components of our drug abuse program. As in the past, the health and welfare of those who work in Baseball will continue to be our paramount concern. No less compelling, however, is the need to maintain the integrity of the game. Drug involvement or the suspicion of drug involvement is inconsistent with maintaining these objectives.

The basic drug policy for the game is simply stated: There is no place for illegal drug use in Baseball. The use of illegal drugs by players, umpires, owners, front office, League or Commissioner's office personnel, trainers or anyone else involved in the game cannot be condoned or tolerated. Illegal drug use can cause injuries on the field, diminished job performance and alienation of those on whom the game's success depends - Baseball fans. Baseball players and personnel cannot be permitted to give even the slightest suggestion that illegal drug use is either acceptable or safe. It is the responsibility of all Baseball players and personnel to see that the use of illegal drugs does not occur, or if it does to put a stop to it by the most effective means possible.

MAJOR LEAGUE BASEBALL'S DRUG POLICY

The possession, sale or use of any illegal drug or controlled substance by Major League players and personnel is strictly prohibited. Major League players or personnel involved in the possession, sale or use of any illegal drug or controlled substance are subject to discipline by the Commissioner and risk permanent expulsion from the game. In addition to any discipline

this office may impose, a Club also may take action under applicable provisions of and special covenants to the Uniform Player's Contract.

This prohibition applies to all illegal drugs and controlled substances, including steroids or prescription drugs for which the individual in possession of the drug does not have a prescription. Clubs will dispense prescription drugs only under the direction of the team physician and appropriate records of such distribution and use will be maintained. All drugs on Club premises will be kept under lock and key. For their own protection, players who are taking a prescription drug under the direction of any physician other than the team physician must notify the team physician of this fact and of the drug(s) prescribed.

Major League Baseball recognizes that illegal drug use has become a national problem, and that some players and Baseball personnel may fall victim to drugs. In such circumstances, Baseball will attempt to treat and rehabilitate individuals with a drug problem through a Club's Employee Assistance Program (EAP) or through resources identified by the Commissioner's Office. Baseball will approach its treatment and rehabilitation efforts with the welfare of both the individual and the game foremost in mind. However, Baseball will not hesitate to permanently remove from the game those players and personnel who, despite our efforts to treat and rehabilitate, refuse to accept responsibility for the problem and continue to use illegal drugs. Finally, the concern of an individual Club about a player's availability to that Club will not be a meaningful consideration in determining the course to be followed. If any Club covers up or otherwise fails to disclose to this office any information concerning drug use by a player, that Club will be fined \$250,000, the highest allowable amount under the Major League Agreement.

DRUG ABUSE PROGRAM COMPONENTS

The elements of Baseball's drug abuse prevention effort are:

1. EMPLOYEE ASSISTANCE PROGRAMS. Each Club has established an Employee Assistance Program (EAP) for its major and minor league players and personnel. These programs are the backbone of our effort. The fundamental objectives of the EAP's are twofold. First, they must provide basic education information to players and personnel about the dangers of drug abuse. Second, they are to be a means of providing confidential, independent and expert counseling and, if needed, rehabilitative assistance.

Any player or personnel may contact either the Commissioner's Office, the Club or the Club's EAP director to request treatment for drug use or alcohol abuse. The EAP director will arrange for an appropriate and confidential medical evaluation of the individual, and will assist in prescribing the appropriate treatment, which may include in-patient or out-patient treatment, counseling and aftercare.

2. TESTING. Baseball believes that its testing program is the most effective means available to deter and detect drug use. For admitted or detected drug users, testing may be a component of that individual's aftercare program for the balance of his or her professional Baseball career.

Samples will be tested for the following controlled substances: cocaine, marijuana, amphetamines, opiates and phencyclidine (PCP). Other drugs may be added to this list if necessary and with prior notice.

- A. Major League Players: Major League players are not subject to unannounced testing for illegal drugs. However, Major League players who have admitted to illegal drug use, or who have been detected using illegal drugs, may be subject to mandatory testing for the remainder of the player's career. The details of the player's aftercare and testing program must be reviewed and approved by the Player Relations Committee and Baseball's Medical Advisor before the player may be tested.
- B. Minor League Players: All minor league players may be subject to unannounced testing for illegal drugs, which shall be conducted in a manner consistent with the applicable law of the state where the Club is located. The list of players to be tested on each occasion will be selected at random by a computer.
- C. Amateur Entry Level Players: All amateur entry level players, whether or not selected in the June draft, will be tested for illegal drug use.
- D. Major and Minor League Non-Playing Personnel: All major and minor league non-playing personnel may be subject to unannounced testing.

- E. Winter League: Baseball will continue to provide consulting and technical support in implementing drug testing programs in the winter leagues.
3. Program Coordinator. Baseball's Drug Prevention Program will be administered by Baseball's Medical Advisor and other individuals designated by the Commissioner's Office.
 4. Testing Times. Samples will be taken no more than four times per season (between March and October) for any individual covered by the program. Individuals with prior dependency problems are subject to follow-up testing more than four times per season. If necessary, off-season testing may take place. Collection will take place at major and minor league ballparks, at the administrative offices of covered management personnel, or at another suitable location.
 5. Testing Methodology. Each specimen may be collected under the direct supervision of a trained collector. Each specimen will be divided into two containers, sealed against tampering, coded to protect the anonymity of the individual involved and secured for transport to the laboratory. Once at the laboratory, one sample will be analyzed and the other stored for confirmatory testing, if necessary. Test results will be communicated by the laboratory to the Medical Advisor.
 6. Laboratories. Northwest Toxicology, Inc. in Salt Lake City, Utah, a laboratory certified by the Substance Abuse and Mental Health Services Administration (SAMHSA), will analyze all samples for illegal drugs and controlled substances. All tests will be performed on state-of-the-art equipment. All samples will be initially screened utilizing a procedure designed to determine the class of any drugs which may be present. If the screening test gives a presumptive positive result, the drug's presence must be confirmed by a second definitive test using the gas chromatography/mass spectrometry (GC/MS) technique.
 7. Discipline. An initial positive test result, the admission of drug use or the identification of drug use through other means will not immediately result in discipline for the player or Baseball personnel involved other than being required to participate in Baseball's testing program. The individual will

be offered the opportunity to enter an Employee Assistance Program (EAP) and participate in any EAP recommended treatment or rehabilitation program. The individual shall suffer no loss of pay while undergoing evaluation and treatment for the first violation of Baseball's policy on the use of illegal drugs and controlled substances. If the individual refuses to enter the Employee Assistance Program, or refuses to cooperate in the EAP recommended treatment or rehabilitation program, discipline will be imposed. A second and any subsequent violation of Baseball's policy on the use of illegal drugs and controlled substances will result in immediate discipline. In addition, any individual involved in the sale or distribution of any illegal drug or controlled substance, or the facilitation of such sale or distribution, will be immediately disciplined. Notwithstanding anything to the contrary contained in this paragraph, any individual convicted of a drug-related offense will be subject to immediate discipline.

8. Refusal to Test. A refusal to take a test, a failure to appear for a test when scheduled to do so, or a deliberate attempt to evade a test or to alter a test result will subject the involved individual to discipline. Baseball expects all individuals covered by its testing program to cooperate fully with the collection agents and all others involved in the program's administration. A refusal to cooperate fully in the testing process will subject the involved individual to discipline.
9. Confidentiality. The confidentiality of players' and other Baseball personnel's medical conditions and test results will be protected to the maximum extent possible and as required by law, recognizing that individuals who violate Baseball's prohibition on the use of illegal drugs or controlled substances use may come to the attention of the public and the media, often in the case of players because of the roster moves necessitated by the loss of the player's services to the Club.

Neither the Medical Advisor, program directors, the testing laboratory, nor anyone in their employ is permitted publicly to disclose or allude to any information acquired in connection with this program, whether or not it refers to identified players or personnel. In addition, neither the Medical Advisor, the program directors, the testing laboratory, nor anyone in their employ is

permitted to comment publicly on behalf of Major League Baseball or to communicate in any fashion with the news media concerning the program and its administration.

Any Club, player, or Baseball personnel that publicly divulges, directly or indirectly, information concerning drug test results or otherwise breaches the confidentiality provisions of this policy may be subject to discipline, including fines.

10. Notice. The Player Relations Committee has distributed to all Clubs a notice setting forth Baseball's drug policy. All Clubs must post the notice in their clubhouses. In addition, copies of this memorandum should be distributed to all players and Baseball personnel.

CONCLUSION

This office will continue to search for positive and constructive methods for dealing with drug use. While Baseball will attempt to treat and rehabilitate any player or personnel who falls victim to a drug problem, we will not hesitate to impose discipline, especially in cases involving repeated offenses or refusals to participate in a recommended and appropriate course of treatment.

If any Club has a question about any aspect of the program, please contact Louis Melendez, Associate Counsel, Major League Baseball Player Relations Committee.

Sincerely,



Bud Selig
Chairman
Major League Baseball
Executive Council

cc: League Presidents
Player Relations Committee
Major League Baseball Players Association
Robert B. Millman, M.D.