

# Statewide Alcohol and Drug Testing Program

RFP 820 — Program Kickoff & Operational Overview

## Nao Medical Team

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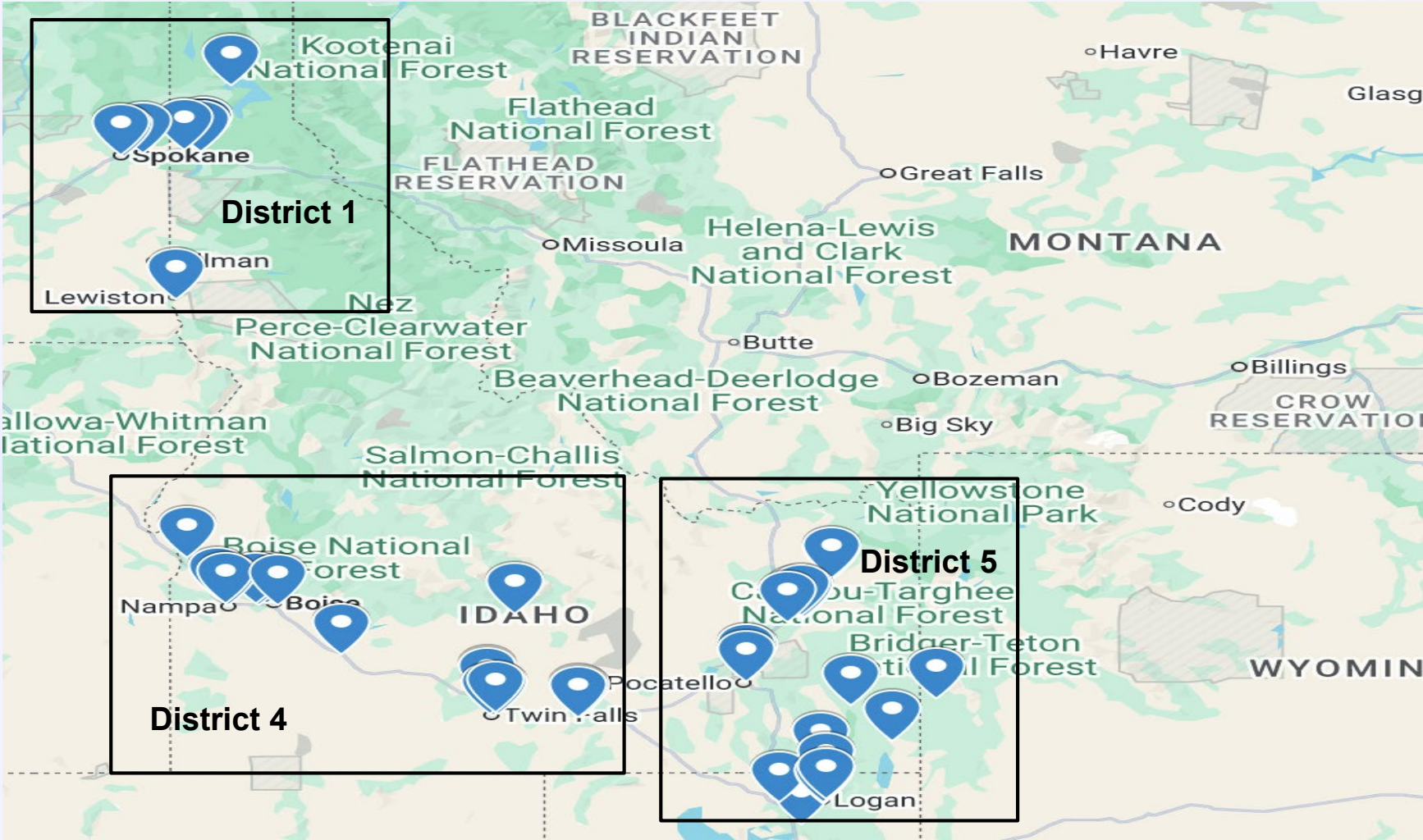
## Today's Goals

- Confirm clarity on the awarded contract (Districts 1, 4, 5)
- Demonstrate full readiness to execute
- Answer your questions on implementation and operations



# Contract Overview

What Nao Medical Is Delivering Under RFP 820



## AWARDED DISTRICTS

### Districts 1, 4, and 5

Full site coverage across each city in the district. Mobile testing teams and after-hours options are available throughout.

**DOT & Non-DOT Urine Drug Test**  
All Reasons, Off site and On Site, Malh

**Breath Alcohol Test (BAT)**  
Available at Selected locations with coverage throughout the district and state

**Rapid Testing**  
Site-specific availability

# Point of Contact and Support



## Dedicated Executive Lead

**Usman Farooq** serves as your primary contact and executive program lead —reachable by phone and email for any priority matter.

[occhealth@naomedical.com](mailto:occhealth@naomedical.com) - [farooqu@naomedical.com](mailto:farooqu@naomedical.com) and 929-552-2218



## 24/7 Availability

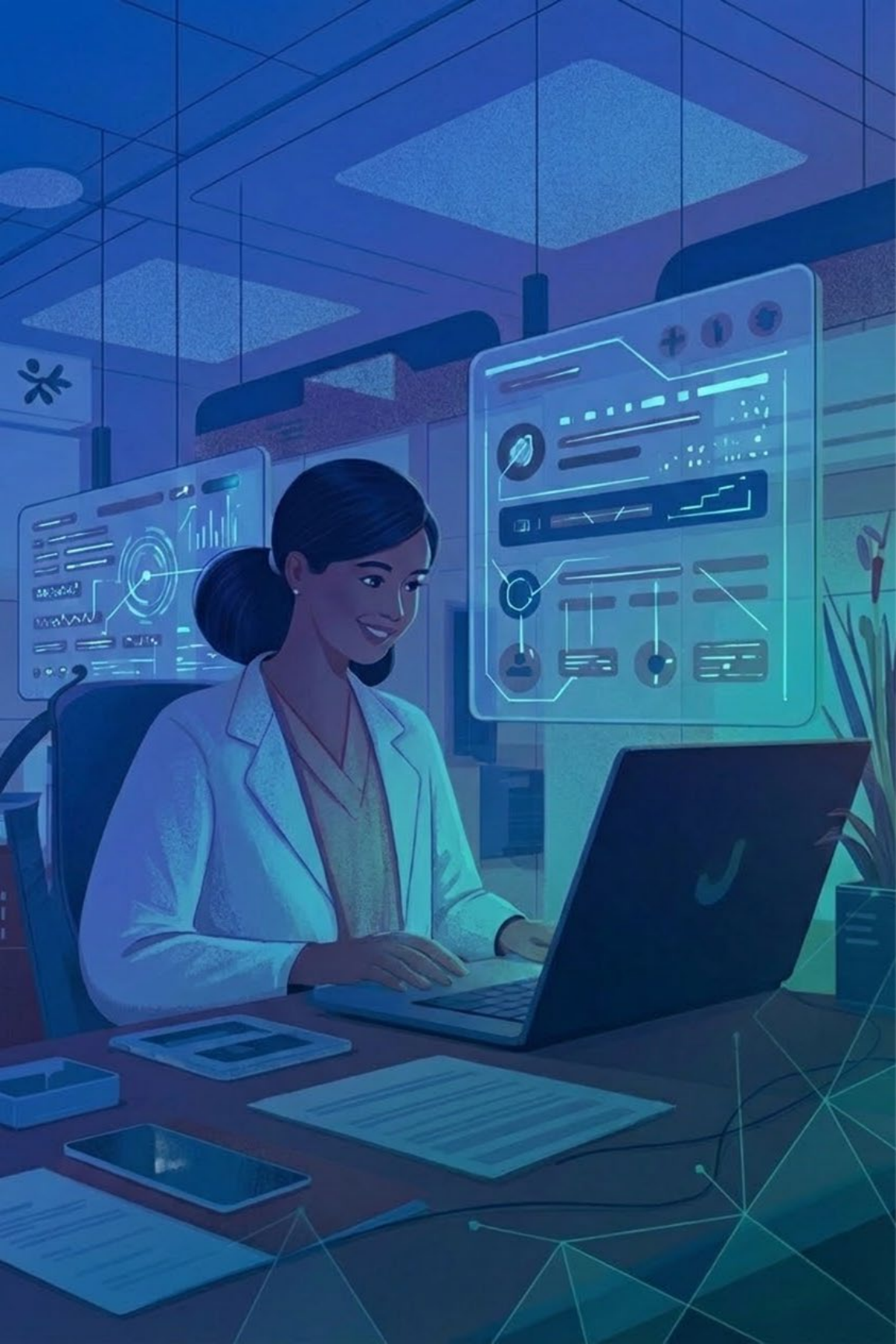
Round-the-clock support for urgent needs—after-hours testing, delayed results, and emergency requests are handled directly.



## Clear Escalation Path

A defined escalation process ensures no issue falls through the cracks. Critical situations are fastracked for immediate resolution.





# Account Setup, Scheduling and Billing

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## Provide DER Information

Name, Phone Number, Email Address, Agency Address, and required test types (DOT, DOT, BAT, Rapid, Afterhours)

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## Lab Account Setup

Estimated 4–5 business days. Electronic orders can begin before physical Chain of Custody forms arrive (3–4 additional days for dispatch).

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## Portal Training

Account training provided with a walkthrough of portal features. Schedule via Portal, Phone, or Email—walk-ins accepted, prescheduling recommended.

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## Billing Configuration

Multiple accounts per agency, separate billing per district, and monthly billing tied to contract number for statewide pricing.

# Testing Process & Results

## Ordering a Test



- Random



- Pre-Employment



- Post-Accident



- Reasonable Suspicion

All tests can be ordered through the portal or by call/email. Each test is associated with a code

## Results & Turnaround



### Results Access

Accessible on the portal by authorized users, including MRO Report, Lab Report, and CCF Document.



### Positive Result Process

MRO investigation covers: Positive Dilute, Positive with Medical Waiver, Negative Dilute, Presumptive Positive, and dispute/litigation support.



**Negative**



**Positive**



**24-48 hrs**  
from lab receipt



**~72 hrs**  
after MRO review &  
donor interview

# Ordering a Test

CREATE ORDER ORDER TEMPLATES ADD ORDER TEMPLATE

NAO MEDICAL

- DASHBOARD
- PROFILE
- USERS (34)
- TOOLS
- ORDERS
- RESULTS / IMAGES
- RANDOMS
- REPORTS

### Personal Information

Primary ID \*


First Name \*

Middle Name

Last Name \*

Primary Phone \*  Daytime ▾

Secondary Phone  Evening ▾  Same as Primary Phone

Date of Birth  

Gender  Male  Female

CREATE ORDER ORDER TEMPLATES ADD ORDER TEMPLATE

### Account

Enter a specific account: \*

OR

Select from available accounts (Max 1000) : \*

Display All  Display Regulated  Display Non-Regulated

- FRESNO COUNTY CALIFORNIA - 12014925
- HALF HOLLOW HILLS SCHOOL - 12076445
- IDAHO TRANSPORTATION DEPT - 12121133
- IDAHO TRANSPORTATION DEPT - 12121147
- IDAHO TRANSPORTATION DEPT - 12121153
- IDAHO TRANSPORTATION DEPT - 12121158

# Ordering a Test

**CREATE ORDER** | ORDER TEMPLATES | ADD ORDER TEMPLATE

**Order Code**

Add Other Order Code

Collection Type \*  Single  Split

Observed

**Reason for Test**

Test Reason

**Collection Site**

Collection Site  [search](#) [clear](#)

Test Reason

- ✓ Select One
- RANDOM
- OTHER
- PRE-EMPLOYMENT
- REASONABLE SUSPICION/CAUSE
- POST ACCIDENT
- FOLLOW UP TEST
- PROMOTION
- RETURN TO DUTY
- TRANSFER

**CREATE ORDER** | ORDER TEMPLATES | ADD ORDER TEMPLATE

**Collection Site**

Collection Site  [search](#) [clear](#)

**Timing Information**

Time Zone   Order has no expiration

Order Expiration Date \*

Order Expiration Time (24hr) \*

**Collection Site Instructions**

Collection site instructions entered here will only be displayed on the QPassport.

250 characters remaining (250 maximum)

# Viewing a Result

**NAO MEDICAL**

- DASHBOARD
- PROFILE
- USERS (34)
- TOOLS
- ORDERS
- RESULTS / IMAGES**
- RANDOMS
- REPORTS

**VIEW RESULTS & IMAGES** | ENTER ALCOHOL | ENTER INSTANT

Primary ID | Donor First Name | Donor Last Name | Drug Specimen ID | **Search** ?

[Search Fields](#) | [Advanced Search](#)

Include Slider Dates ?

90 days | 60 days | 30 days

Dec 4 | Mar 4

[Preferences](#) ?

Show Hidden Only | [Hide](#) | [Print Selection](#) ?

<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
	COPY 1	COPY 2	PRIMARY ID	DONOR NAME	TEST REASON	DRUG SPECIMEN ID	SPECIMEN TYPE	REPORTED	Result Status	POOL NAME	PASSPORT ID	
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							Negative			<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							Negative			<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							Negative			<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							Negative			<input type="checkbox"/>
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>							Scheduled		Q21169560	<input type="checkbox"/>

# Viewing a Result



[Redacted]

U

03/03/2026 Negative

Primary ID

Donor Name

Accession #

Ordered By

Account Number

Lab Received

Collected

Specimen ID

Requisition #

Ordered

Passport ID

Order Expiration

Date Tested 03/03/2026 8:16 AM CT

Lab Reported 03/03/2026 7:13 PM CT

Specimen Type U

Test Reason RANDOM

Order Code 45014N

Collection Site [AA718](#) \$\$ Preferred

Testing Lab [Quest](#)  
[Diagnostics-](#)  
[Lenexa](#)

Testing Status Negative

Appointment

Remarks

NOTES



1



Edit

Lab Report

Copy1

Copy2

Print

# Questions & Open Discussion

We welcome your questions on any aspect of the program. Common topics include:

- Ordering & Portal Workflow
- Results Turnaround & MRO Process
- Billing Setup & Contract Pricing
- Site Coverage & Mobile Deployment
- Post-Accident Protocols & Positive Result Disputes

📄 **Usman Farooq**—Nao Medical Program Lead | Available for follow-up after this session via phone or email.