



**New Mexico MedWorks**  
**3600 Rodeo Lane Suite A-2, Santa Fe, N.M. 87507**  
**Phone: 505-474-4251 Fax: 505-474-4277**

**Employer Protocols**

**Employer:**  
**Address:**  
**City & State:**  
**Phone:**  
**Fax:**  
**Contact:**  
**Primary Contact:**

**Number of employees:**  
**Insurance Carrier:**  
**Address:**  
**Adjuster:**  
**Phone:**  
**Fax:**

**Injuries:**

- Do you require a post accident drug & alcohol test after each injury?

**Non-Injury Prices:**

- **DOT UDS** ( *Pre-Employment, Random, Post Accident, Reasonable Suspicion/Cause, Periodic, Follow-up.*)-----\$ \_\_\_\_\_  
**MRO** ( *Medical Review Officer*) \$ \_\_\_\_\_
- **Non-DOT UDS** ( *Pre-Employment, Random, Post Accident, Reasonable Suspicion/Cause, Periodic, Follow-up.*)-----\$ \_\_\_\_\_
- **Instant UDS** ( *Medtox Profile II*)----\$ \_\_\_\_\_
- **DOT Physical** ( *Pre-Employment and Recertification*)-----\$ \_\_\_\_\_
- **Breath Alcohol Test** ( *Pre-Employment, Random, Post Accident, Reasonable Suspicion/Cause, Periodic, Follow-up.*)-----\$ \_\_\_\_\_
- **Alcohol Saliva Test** ( *Pre-Employment, Random, Post Accident, Reasonable Suspicion/Cause, Periodic, Follow-up.*)-----\$ \_\_\_\_\_
- **Breath Alcohol Confirmation** ( *To confirm positive BAT or alcohol saliva screen.*---\$ \_\_\_\_\_
- **MRO** ( *For positive Non-DOT urine drug screens.*)\$ \_\_\_\_\_

**Special Instructions or additional services requested:**

Policy on payments:

New Mexico MedWorks will submit claims for injuries to the employers' insurance carrier in accordance with the New Mexico statute and fee schedule.

All other contracted services such as employment physicals, drug and alcohol screens, etc. will be billed monthly directly to the employer.

\_\_\_\_\_  
 Authorized signature

\_\_\_\_\_  
 Date

