



**Major League Baseball's
Minor League Drug Prevention
And Treatment Program**

**MAJOR LEAGUE BASEBALL'S
MINOR LEAGUE DRUG PREVENTION
AND TREATMENT PROGRAM**

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**MAJOR LEAGUE BASEBALL'S
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AND TREATMENT PROGRAM**

Major League Baseball's Minor League Drug Prevention and Treatment Program (the "Program") was established to prevent and end the use of Prohibited Substances (defined in Section 2 below) by all non 40-man roster Minor League players ("Players"). The Office of the Commissioner of Baseball has concluded that the use of Prohibited Substances is potentially hazardous to a Player's health and may give a Player an unfair competitive advantage.

The Program covers all Players who are under a Minor League contract during the 2014 season and 2014-2015 off-season. If a Player was under contract during the 2014 season and has not voluntarily retired, he is also subject to the drug testing provisions set forth in the Program.

1. MINOR LEAGUE HEALTH POLICY ADVISORY COMMITTEE ("MLHPAC")

A. MLHPAC Members

MLHPAC is responsible for administering and overseeing the Program. MLHPAC is comprised of the Medical Representative to MLHPAC (the "Medical Representative"), the Office of the Commissioner's Consultant on Behavioral Health and Addiction (the "Addiction Consultant") and two other members (with at least one member being a duly licensed attorney).

B. Appointment and Removal of MLHPAC Members

The members of MLHPAC are appointed and removed by the Commissioner. The current members of MLHPAC are Daniel R. Halem, Jonathan D. Coyles, Bryan W. Smith, M.D., who is the Medical Representative, and Laurence M. Westreich, M.D., who is the Addiction Consultant.

C. Duties and Responsibilities of MLHPAC

MLHPAC shall have the following duties and responsibilities:

1. To administer the Program's testing requirements, from the scheduling of specimen collections to the reporting of test results;
2. To monitor, maintain and supervise the Collection Procedures and Testing Protocols set forth in Addendum A;
3. To effectively resolve any appeals of discipline imposed as a result of violations of the Program;
4. To establish uniform guidelines and qualifications related to the Program for the Clubs' Employee Assistance Programs and monitor the performance of each Club's Employee Assistance Professional ("EAP");

5. To create, or participate in creating, individualized Treatment Programs for Players and monitor Players' Treatment Program progress;
6. To oversee the Therapeutic Use Exemption ("TUE") process of the Program;
7. To periodically review all aspects of the operation of the Program and to make recommendations to the Commissioner for appropriate amendments;
8. To develop educational programs and materials supporting the objectives of the Program; and
9. To take any and all other reasonable actions necessary to ensure the proper and efficient administration of the Program.

2. PROHIBITED SUBSTANCES

All Players are prohibited from using, possessing, distributing or selling (or assisting in the distribution or sale of) any Drug of Abuse, Stimulant and/or Performance Enhancing Substance (collectively referred to as "Prohibited Substances"). Some Prohibited Substances are available for over-the-counter purchase or with a prescription in the United States or other countries. Unless a Player has successfully obtained a TUE in accordance with the provisions of Section 10 of the Program, a Player will not be excused from a positive test result because the Prohibited Substance was obtained over-the-counter or through a valid prescription.

A. Drugs of Abuse

Any and all drugs or substances included on Schedules I and II of the Code of Federal Regulations' Schedule of Controlled Substances ("Schedule I or Schedule II"), as amended from time to time, shall be considered a Drug of Abuse covered by the Program (excluding those Schedule I and II substances included as Stimulants or Performance Enhancing Substances below). Moreover, any drug or substance that is not included in either Schedule I or II shall be considered a Drug of Abuse if it: (i) is similar in nature to a substance in Schedule I or II; (ii) cannot be lawfully taken without a valid prescription and has the potential for abuse; or (iii) cannot be lawfully obtained or used in the United States. The following is a non-exhaustive list of Drugs of Abuse covered by the Program:

1. Natural Cannabinoids (*e.g.*, THC, Hashish and Marijuana)
2. Synthetic THC and Cannabimimetics (*e.g.*, JWH-018, JWH-073, and "Spice")
3. Cocaine
4. Opiates (*e.g.*, Oxycodone, Heroin, Codeine, and Morphine)
5. "Bath Salts" (*e.g.*, Mephedrone and MDPV)
6. MDMA (Ecstasy)
7. GHB
8. LSD
9. Phencyclidine (PCP)

B. Stimulants

The following substances (including both their D and L isomers where relevant) shall be considered Stimulants under the Program. Notwithstanding the foregoing, MLHPAC reserves the right to add a Stimulant at any time if it determines that the ingestion of such substance would result in a Player having an unfair competitive advantage.

Adrafinil, Amfepramone (Diethylpropion), Amiphenazole, Amphetamine, Amphetaminil, Armodafinil, Benfluorex, Benzphetamine, Benzylpiperazine, Bromantan, Carphedon, Cathine (Norpseudoephedrine), Chlorphentermine, Clobenzorex, Clortermine, Cropropamide, Crotetamide, Dimethylamylamine Dimethylamphetamine, Ephedrine, Etamivan, Ethlyamphetamine, Etilefrine, Famprofazone, Fenbutrazate, Fencamine, Fencamfamine, Fenethylline, Fenfluramine, Fenproporex, Furfenorex, Heptaminol, Isometheptene, Levmetamphetamine, Meclofenoxate, Mefenorex, Mephentermine, Mesocarb, Methamphetamine (Methylamphetamine), Methylenedioxyamphetamine, Methylenedioxymethamphetamine, Methylephedrine, Methylhexanamine (Dimethylpentylamine, DMAA), Methylphenidate, Modafinil, N,alpha-Diethylphenylethylamine (N,a-DEPEA), N-ethyl-1-phenyl-2-butanamine, Nikethamide, Norfenefrine, Norfenfluramine, Octopamine, Oxilofrine (Methylsynephrine), Parahydroxyamphetamine, Pemoline, Pentetrazol, Phendimetrazine, Phenmetrazine, Phenpromethamine, Phentermine, Prenylamine, Prolintane, Propylhexedrine, Selegiline, Sibutramine, Strychnine, Tuaminoheptane, and other substances with a similar chemical structure or similar biologic effect(s).

C. Performance Enhancing Substances

The following substances shall be considered Performance Enhancing Substances under the Program. Notwithstanding the foregoing, MLHPAC reserves the right to add a Performance Enhancing Substance at any time if it determines that the ingestion of such substance would result in a Player having an unfair competitive advantage.

1. Anabolic Agents

- a. Any and all Anabolic Androgenic Steroids included in Schedule III of the Code of Federal Regulations' Schedule of Controlled Substances ("Schedule III"), as amended from time to time, shall be considered a Performance Enhancing Substance covered by the Program. Anabolic Androgenic Steroids that are not included in Schedule III but that may not be lawfully obtained or used in the United States (including "designer steroids" and peptide hormones) shall also be considered Performance Enhancing Substances covered by the Program. The following is a non-exhaustive list of Anabolic Androgenic Steroids that are covered by the Program:

Androstadienedione, Androstanediol, Androstanedione, Androstenediol, Androstenedione, Androst-2-en-17-one (2-Androstenone, Delta-2), Androsterone, Bolandiol, Bolasterone, Boldenone, Boldione, Calusterone, Clostebol, Danazol,

Dehydrochlormethyltestosterone (Turinabol), Dehydroepiandrosterone (DHEA), Desoxymethyltestosterone (DMT, Madol), Dihydrotestosterone, Drostanolone, Epiandrosterone, Epi-dihydrotestosterone, Epitestosterone, Ethylestrenol, Fluoxymesterone, Formebolone, Furazabol, Gestrinone, 4-Hydroxytestosterone, Mestanolone, Mesterolone, Methandienone, Methandriol, Methasterone (Superdrol), Methenolone, Methyldienolone, Methylnortestosterone, Methylstenbolone (Ultradrol, M-Sten), Methyltestosterone, Methyltrienolone (Metribolone), Mibolerone, Nandrolone, Norandrostenediol, Norandrostenedione, Norandrosterone, Norbolethone (Genabol), Norclostebol, Norethandrolone, Noretiocholanolone, Oxabolone, Oxandrolone, Oxymesterone, Oxymetholone, Prasterone (DHEA), Prostanazolol, Quinbolone, Stanozolol, Stenbolone, Testosterone, Tetrahydrogestrinone, Trenbolone, and other substances with a similar chemical structure or similar biologic effect(s).

- b. Other Anabolic Agents including, but not limited to, Clenbuterol, Selective Androgen Receptor Modulators (SARMs), Tibolone, Zeranol, and Zilpaterol.

2. Peptide Hormones, Growth Factors and Related Substances

The following substances, and other substances with a similar chemical structure or similar biological effect(s), are prohibited:

- a. Growth Hormone (GH or hGH) and its releasing factors;
- b. Insulin-Like Growth Factor-1 (IGF-1), including all isomers of IGF-1 sometimes referred to as Mechano Growth Factors (MGFs);
- c. Human Chorionic Gonadotrophin (hCG), Luteinizing Hormone (LH) and their releasing factors;
- d. Growth Hormone Releasing Peptides, including, but not limited to, GHRP-2, GHRP-6, CJC-1295, Hexarelin and Ibutamoren;
- e. Peptide Hormones, including, but not limited to, AOD-9604, Alexamorelin, Ipamorelin, Melanotan, Sermorelin, Tesamorelin, Thymosin Beta 4 (TB-500) and Triptorelin;
- f. Corticotrophins and their releasing factors; and
- g. Erythropoiesis-Stimulating Agents (*e.g.*, Erythropoietin (EPO), Darbepoetin (dEPO), Hematide and Methoxy polyethylene glycol-epoetin beta (CERA)).

3. Hormone and Metabolic Modulators

The following substances, and other substances with a similar chemical structure or similar biological effect(s), are prohibited:

- a. Aromatase Inhibitors including, but not limited to, Anastrozole, Androstatrienedione (ATD), Androstenedione (6-OXO), Aminoglutethimide, Dianastrozole, Exemestane, Formestane, Letrozole, and Testolactone;
- b. Selective Estrogen Receptor Modulators (SERMs), including, but not limited to, Raloxifene, Tamoxifen, and Toremifene;
- c. Other Anti-Estrogens including, but not limited to, Clomiphene, Cyclofenil, and Fulvestrant;
- d. Agents modifying myostatin function(s) including, but not limited to, Myostatin Inhibitors; and
- e. Metabolic modulators, including Peroxisome Proliferator Activated Receptor δ (PPAR δ) agonists, including GW 1516, GW 0742 and AICAR.

4. Diuretics and Masking Agents

Masking agents are defined as products that substitute, dilute, mask or adulterate a specimen used in drug testing or impair the excretion of Prohibited Substances to conceal their presence in a specimen.

- a. Masking agents include: Diuretics, Desmopressin, Probenecid, Plasma Expanders, and other substances with similar biological effect(s).
- b. Diuretics include: Acetazolamide, Amiloride, Bumetanide, Canrenone, Chlorthalidone, Etacrynic Acid, Furosemide, Indapamide, Metolazone, Spironolactone, Thiazides (*e.g.*, Bendroflumethiazide, Chlorothiazide, and Hydrochlorothiazide), Triamterene, and other substances with a similar chemical structure or similar biological effect(s).

5. Gene Doping

The transfer of polymers of nucleic acids or nucleic acid analogs, or the use of normal or genetically modified cells, with the potential to enhance sports performance is prohibited.

3. PROHIBITION OF SYRINGES

The use and possession of syringes by Players in any Club facility, Club-provided housing (including academies and hotel rooms), or while traveling with the Club is prohibited under the Program. Any Player who uses or possesses a syringe without the express approval of a Club physician will be subject to discipline under Section 8.G of the Program.

4. NUTRITIONAL AND DIETARY SUPPLEMENTS

Because the nutritional and dietary supplement industry is not subject to stringent government regulation, over-the-counter nutritional and dietary supplements may be mislabeled, or may contain or be contaminated with a Prohibited Substance which is not listed as an ingredient on the label. As a result, a Player may test positive for a Prohibited Substance from taking a supplement. Such test results will be deemed a positive test result pursuant to Section 5.F below even if the Player claims he was not aware that the product contained a Prohibited Substance, was mislabeled or was contaminated. Players are solely responsible for the substances they put in their bodies under the Program.

The only supplements that Players can use without the risk of a positive test result are products that have been certified under the NSF Certified for Sport program. The NSF Certified for Sport program provides a guarantee that a product does not contain any Prohibited Substances. Players act at their own risk if they ingest any supplements that are not NSF Certified for Sport. An up-to-date list of NSF Certified for Sport products is available at www.NSFsport.com.

5. TESTING

A. Random Testing

1. In-Season Testing: All Players shall be subject to random, unannounced tests for the use of Prohibited Substances at all times during the season, including, but not limited to, before and after all games. If a Player tests positive for a Prohibited Substance, he shall be subject to the discipline set forth in Section 8 and will be subject to additional follow-up testing under the Program.
2. Off-Season Testing: All Players shall be subject to random, unannounced tests for the use of Prohibited Substances during the off-season. Players are responsible for providing the National Center for Drug Free Sport (“Drug Free Sport”) with: (i) accurate off-season contact and location information (*e.g.*, phone numbers and addresses); (ii) the dates they will not be available for testing during the off-season; and (iii) the reasons for their unavailability.

Players must contact J.D. Matheus at Drug Free Sport by phone at (877) 677-4287 ext. 114 or by e-mail at jmatheus@drugfreesport.com if their off-season contact or location information changes for any reason or for any time period (*e.g.*, winter ball, vacation, injury rehab, etc.). If Drug Free Sport attempts to test a Player during the off-season and is unable to contact him using the information that he provided, he will be charged with a positive drug test for failure to take a test, which will subject him to the discipline set forth in Section 8. If a Player is at a different location from the one he provided to Drug Free Sport, the Player will be required to immediately travel to the collector’s location. If a Player fails or refuses to comply with this requirement, he will be charged with a positive drug test for failure to take a test, which will subject him to the discipline set forth in Section 8.

B. Reasonable Cause Testing

In the event that any MLHPAC member has or receives information that gives him reasonable cause to believe that a Player has engaged in the use, possession, distribution or sale of a Prohibited Substance, such member shall immediately present the information to the other MLHPAC members. Upon hearing the information presented, MLHPAC may either immediately determine that there is reasonable cause to believe that the Player has engaged in the use, possession, distribution or sale of a Prohibited Substance or MLHPAC may request that the Office of the Commissioner's Department of Investigations conduct an investigation to determine additional facts. If MLHPAC determines that reasonable cause exists, the Player will be subject to immediate testing in accordance with the Collection Procedures and Testing Protocols set forth in Addendum A. If the Player tests positive for a Prohibited Substance in a reasonable cause test, he will be subject to the discipline set forth in Section 8.

C. Follow-Up Testing

A Player who has tested positive for a Prohibited Substance under the Program, or has otherwise violated the Program through the use, possession, distribution or sale of a Prohibited Substance, shall be subject to mandatory follow-up testing. The number of mandatory follow-up tests shall be determined by MLHPAC. Follow-up testing shall be in addition to any testing conducted pursuant to Sections 5.A and 5.B above. If a Player tests positive for a Prohibited Substance in any follow-up test, he will be subject to the discipline set forth in Section 8.

D. Longitudinal Profile Program

A longitudinal steroid profile program will be established for each Player in accordance with this Section 5.D. The purpose of the longitudinal profile program is to assist MLHPAC in determining which urine specimens shall be subjected to carbon isotope ratio mass spectrometry ("IRMS") analysis. MLHPAC will maintain a secure database that contains each Player's baseline endogenous steroid profile and standard deviation (referred to collectively as "Baseline Values"). Baseline Values will be calculated by averaging a Player's Testosterone/Epitestosterone ("T/E") ratio, Testosterone concentration (corrected to SG 1.020), Epitestosterone concentration (corrected to SG 1.020), and other endogenous steroid markers determined by MLHPAC, from three negative tests conducted under the Program. After a Player's Baseline Values are established, these values will be considered a Player's longitudinal profile for the duration of his coverage under the Program. MLHPAC will consider the Baseline Values in comparison to subsequent samples provided by a Player in determining whether to conduct IRMS analysis on a urine specimen. MLHPAC shall have the sole discretion to determine whether to conduct IRMS analysis on a urine specimen.

E. Collection Procedures

All testing conducted pursuant to the Program shall be conducted in compliance with the Collection Procedures and Testing Protocols set forth in Addendum A.

F. Positive Test Results

Any test conducted under the Program will be considered “positive” under the following circumstances:

1. If any Prohibited Substance is detected in the specimen provided by a Player (certain Prohibited Substances are subject to the test levels set forth in the Testing Protocols of Addendum A);
2. A Player fails or refuses to take a test pursuant to Section 5 or otherwise engages in activity that prevents the collection of a specimen under the Program;
3. A Player attempts to substitute, dilute, mask or alter a specimen, attempts to impair the excretion of a Prohibited Substance in a specimen, or attempts to tamper with a test in any way (including, but not limited to, catheterization, specimen substitution and/or adulteration); or
4. If Drug Free Sport attempts to test a Player during the off-season and is unable to contact him using the information that he provided, or if the Player is at a different location from the one he provided to Drug Free Sport and he fails or refuses to immediately travel to the collector’s location.

The determination of whether a test is “positive” under Section 5.F.2, 5.F.3 or 5.F.4 shall be made by MLHPAC. A Player who violates Section 5.F.2, 5.F.3 or 5.F.4 shall be considered to have tested positive for the category of Prohibited Substance that, given his testing history, will result in the longest suspension. Notwithstanding the preceding sentence, if the Player can demonstrate by clear and convincing evidence that his conduct was not related to the category of Prohibited Substance for which he was considered to have tested positive, he shall be considered to have tested positive for the category of Prohibited Substance the use of which he was attempting to avoid detection. Such a violation of Section 5.F.2, 5.F.3 or 5.F.4 shall be considered a prior offense only if the Player subsequently tests positive for, or is otherwise determined to have used or possessed, the category of Prohibited Substance the use of which the Player was attempting to avoid detection.

G. Notification

1. Drugs of Abuse: For a first positive test result for a Drug of Abuse, MLHPAC will immediately notify the Club’s General Manager, Farm Director and EAP of a Player’s positive test result, the date of the collection and the Drug of Abuse for which the Player tested positive. The EAP will be responsible for informing the Player of the positive test result. For Players participating in the Dominican and Venezuelan Summer Leagues, the Dominican-based EAP retained by the Office of the Commissioner will be responsible for informing the Player of the positive test result. MLHPAC will request written confirmation from the Club that a Player has been informed of his first positive test result for a Drug of Abuse.

For any subsequent positive test result for a Drug of Abuse, MLHPAC will notify the Club's General Manager, Farm Director and EAP of the Player's positive test result, the date of the collection, the Drug of Abuse for which the Player tested positive, and the discipline that is being imposed. The Club's General Manager or Farm Director will be responsible for informing the Player of the positive test result and the discipline that is being imposed. For Players participating in the Dominican and Venezuelan Summer Leagues, the Dominican-based EAP retained by the Office of the Commissioner will be responsible for informing the Player of the positive test result and the discipline that is being imposed.

2. Performance Enhancing Substances, Stimulants and Other Violations: MLHPAC will immediately notify the Club's General Manager and Farm Director of the nature of the Player's positive test result or violation, the date of the collection or violation, the Performance Enhancing Substance involved, and the discipline that is being imposed. The Club's General Manager or the Farm Director may, at his discretion, inform the EAP of the positive test result or violation. The Club's General Manager or Farm Director will be responsible for informing the Player of the positive test result or violation, and the discipline imposed. For Players participating in the Dominican and Venezuelan Summer Leagues, the Dominican-based EAP retained by the Office of the Commissioner will be responsible for informing the Player of the positive test result or violation, and the discipline that is being imposed.

6. EVALUATION AND TREATMENT FOR DRUGS OF ABUSE

A Player who is referred to MLHPAC as a result of the use or suspected use of a Drug of Abuse, through a positive test or otherwise, shall be placed on a Treatment Program, consistent with the terms of this Section 6. A Player shall be placed on Treatment Program if: (i) the Player tests positive for a Drug of Abuse under the Program or in a Club-administered test; (ii) the Player is involved in the use, possession, distribution or sale of a Drug of Abuse; (iii) the Player voluntarily comes forward to either MLHPAC or his Club and acknowledges using a Drug of Abuse; (iv) the Club suggests to the Player that he seek assistance from either MLHPAC or an EAP for a Drug of Abuse; (v) the Club and/or MLHPAC believe that the Player poses a threat to the safety of himself or others; or (vi) the Player is convicted or pleads guilty (including a plea of *nolo contendere* or similar plea) to the possession or use of a Drug of Abuse (including a criminal charge of attempt to possess or use).

A. Mandatory Evaluation

All Players who are referred to MLHPAC as a result of the use or suspected use of a Drug of Abuse shall receive an evaluation from the Club's EAP and/or the Addiction Consultant ("Mandatory Evaluation"). The purpose of the Mandatory Evaluation is to determine the type of Treatment Program that, in the opinion of the Addiction Consultant and the EAP, would be most effective for the Player involved. A Player who fails or refuses to submit to a Mandatory Evaluation shall be subject to discipline under Section 8.D below.

B. Treatment Program

After concluding the Mandatory Evaluation and consulting with MLHPAC, the Addiction Consultant and/or the EAP will prescribe a Treatment Program for the Player that, in the opinion of Addiction Consultant and the EAP, would be most effective for the Player involved. The Treatment Program may include any or all of the following: counseling, in-patient treatment, out-patient treatment and follow-up testing. The Treatment Program must be in writing and signed by the Player. The Addiction Consultant or the EAP must inform the Player of the initial duration and content of the Treatment Program. During the course of the Player's Treatment Program, the Addiction Consultant and the EAP may change the duration and the content of the Treatment Program, depending on the Player's progress. The EAP shall forward a Treatment Program Progress Report (attached hereto as Addendum B) immediately following the Mandatory Evaluation and on a monthly basis to the Addiction Consultant for any Player on a Treatment Program.

7. CONFIDENTIALITY

A. Player Authorization

All Players are required in Spring Training to sign the Authorization for the Use and/or Disclosure of Non 40-Man Roster Player Health Information ("HIPAA Release"), attached hereto as Addendum C. Players participating in the Dominican and Venezuelan Summer Leagues, or in other short-season or rookie leagues, will be required to sign the HIPAA Release prior to the start of their respective seasons. Any information regarding a Player's test results under the Program or his Treatment Program progress shall be deemed "Health Information" subject to disclosure pursuant to Paragraph 1 of the HIPAA Release. This HIPAA Release will permit the Club and/or MLHPAC to disclose a Player's Program-related records to a Club that is interested in acquiring the Player or signing the Player as a free agent.

B. Disclosure of Player Information

1. Club Disclosure: A Club must disclose information regarding the Player's pending discipline under the Program to a Club that is interested in acquiring such Player's contract. A Player's Club may issue a public statement in response to a Player's suspension.

A Club whose Player is on a Treatment Program is prohibited from disclosing any information regarding the Player's Treatment Program, or his progress thereunder, to the public, the media or other Clubs. Notwithstanding the foregoing, a Club is permitted to discuss a Player's Treatment Program status with another Club that is interested in acquiring the Player's contract.

2. Office of the Commissioner Disclosure: If a Player is suspended for a violation of the Program, the suspension shall be entered in the Electronic Baseball Information System as a suspension for a specified number of games for a violation of the Program. The Office of the Commissioner may issue a press release announcing a Player's violation of the Program which discloses the nature of the violation, the

length of the suspension, and the category of Prohibited Substance (*e.g.*, Drug of Abuse, Stimulant, or Performance Enhancing Substance) that resulted in the violation. For Stimulants and Performance Enhancing Substances, the Office of the Commissioner may also disclose the specific substance for which the Player tested positive or was determined to have used, possessed or distributed.

A Club that is interested in signing or has already signed a Minor League free agent should contact Daniel R. Halem or Jonathan D. Coyles at the Office of the Commissioner to obtain information regarding a Player's Treatment Program, testing history or potential discipline under the Program.

3. Notwithstanding anything to the contrary above, either the Office of the Commissioner or a Player's Club may disclose publicly details of a Player's test results or violation, test history and/or the Player's challenge to discipline imposed pursuant to Section 8 below to respond to any inaccurate or misleading claims by that Player that could undermine the integrity and/or credibility of the Program.

8. DISCIPLINE

For purposes of the penalties in Section 8.A, 8.B, 8.C, 8.E, 8.F and 8.H below, a Player's violation of Major League Baseball's Joint Drug Prevention and Treatment Program ("Joint Drug Program") that occurred after March 1, 2008 shall be treated as a violation of this Program, provided such violation resulted in the Player's suspension under the Joint Drug Program. For example, if a Player previously was suspended as a result of testing positive for a Performance Enhancing Substance under the Joint Drug Program, the Player will receive the applicable discipline for a second positive test result if he subsequently tests positive, or is otherwise found to have possessed or used, a Performance Enhancing Substance under this Program. A positive test result reported prior to March 1, 2008 under the former Dominican Summer League Drug Prevention and Treatment Program shall not be considered in determining the number of times that a Player has tested positive under this Program. For purposes of calculating the length of a suspension pursuant to this Section 8, a Player's suspension for violating the Program shall be determined according to the league to which the Player is assigned at the time his discipline is imposed, unless provided otherwise below. As used in this Section 8, "Short-Season League" shall refer to the following Minor Leagues: New York-Penn League, Northwest League, Appalachian League, Pioneer League, Arizona League, Dominican Summer League, Gulf Coast League, and Venezuelan Summer League. Any other Minor League shall be considered a "Full-Season League" for purposes of this Section 8. If a Player violates the Program during the off-season, the length of his suspension shall be determined based on the league to which the Player was assigned during the preceding season.

A. Performance Enhancing Substance Violations

A Player who tests positive for a Performance Enhancing Substance shall be subject to the discipline set forth below. For purposes of this Section 8.A, a prior violation of Section 8.E, 8.F, and/or 8.H involving a Performance Enhancing Substance shall be considered a violation of Section 8.A in determining whether a positive test result constitutes a Player's first, second or third violation of Section 8.A.

1. First violation: 80-game suspension or a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, whichever is shorter;
2. Second violation: a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, unless at the time of discipline the Player is assigned to a Short-Season League (defined above), in which case the suspension shall be equal to twice the total number of championship season games in the Short-Season League to which the Player is assigned; and
3. Third violation: Permanent suspension from Major and Minor League Baseball.

B. Stimulant Violations

A Player who tests positive for a Stimulant shall be subject to the discipline set forth below. For purposes of this Section 8.B, a prior violation of Section 8.E, 8.F, and/or 8.H involving a Stimulant shall be considered a violation of Section 8.B in determining whether a positive test result constitutes a Player's first, second or third violation of Section 8.B.

1. First violation: 50-game suspension or a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, whichever is shorter;
2. Second violation: 100-game suspension; and
3. Third violation: Permanent suspension from Major and Minor League Baseball.

C. Drug of Abuse Violations

A Player who tests positive for a Drug of Abuse shall be subject the discipline set forth below. For purposes of this Section 8.C, a prior violation of Section 8.D, 8.E, 8.F, and/or 8.H involving a Drug of Abuse shall be considered a violation of Section 8.C in determining whether a positive test result constitutes a Player's first, second or third violation of Section 8.C.

1. First violation: Mandatory Evaluation and follow-up testing pursuant to Section 5.C above;

2. Second violation: 50-game suspension or a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, whichever is shorter;
3. Third violation: 100-game suspension; and
4. Fourth violation: Permanent suspension from Major and Minor League Baseball. A Player may be eligible for reinstatement if he successfully completes a Treatment Program. The decision whether to reinstate a Player shall be in the sole discretion of the Commissioner.

D. Failure to Comply with a Mandatory Evaluation or Treatment Program

A Player who fails to comply with his Mandatory Evaluation or Treatment Program shall be subject to the following discipline:

1. First failure to comply: 50-game suspension or a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, whichever is shorter;
2. Second failure to comply: 100-game suspension; and
3. Third failure to comply: Permanent suspension from Major and Minor League Baseball. A Player on a Treatment Program may be eligible for reinstatement if he successfully completes the Treatment Program. The decision whether to reinstate a Player shall be in the sole discretion of the Commissioner.

E. Conviction for the Use or Possession of a Prohibited Substance

A Player who is convicted or pleads guilty (including a plea of *nolo contendere* or similar plea) to the use or possession of a Prohibited Substance (including a criminal charge of attempt to possess or use) shall be subject to the following discipline:

1. First offense: if the Prohibited Substance is a Performance Enhancing Substance, an 80-game suspension or a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, whichever is shorter; or if the Prohibited Substance is a Drug of Abuse or a Stimulant, the shorter of a 50-game suspension or a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program;
2. Second offense: if the Prohibited Substance is a Performance Enhancing Substance, a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, unless at the time of his discipline under the Program the Player is assigned to a Short-Season League (defined above), in which case the suspension shall be equal to twice the total number of championship season games in the Short-Season League to which the

Player is assigned; or if the Prohibited Substance is a Drug of Abuse or a Stimulant, a 100-game suspension; and

3. Third offense: Permanent suspension from Major and Minor League Baseball. For convictions or guilty pleas involving a Drug of Abuse, a Player may be eligible for reinstatement if he successfully completes a Treatment Program. The decision whether to reinstate a Player shall be in the sole discretion of the Commissioner.

For purposes of this Section 8.E, a prior violation of Section 8.A, 8.B, 8.C, 8.D, 8.F and/or 8.H shall be deemed to be a prior offense under Section 8.E for purposes of determining whether the conviction or guilty plea constitutes the Player's first, second or third offense.

F. Participation in the Distribution or Sale of a Prohibited Substance

A Player who participates in the sale or distribution of a Prohibited Substance shall be subject to the following discipline:

1. First offense: a suspension equal to the total number of championship season games in the league to which the Player is assigned at the time of his discipline under the Program, unless at the time of his discipline under the Program the Player is assigned to a Short-Season League (defined above), in which case the suspension shall be equal to twice the total number of championship season games in the Short-Season League to which the Player is assigned; and
2. Second offense: Permanent suspension from Major and Minor League Baseball.

G. Use or Possession of a Syringe

A Player who uses or possesses a syringe in violation of Section 3 of the Program shall be subject to the following discipline:

1. First violation: 25-game suspension;
2. Second violation: 80-game suspension; and
3. Third violation: Permanent suspension from Major and Minor League Baseball.

H. Commissioner Discretion

The Commissioner has the discretion to discipline a Player for any violation of the Program not referenced in Sections 8.A through 8.G above, including, but not limited to, non-analytical positives, a failure to cooperate fully with an investigation conducted by the Office of the Commissioner (including refusing to answer questions truthfully in an investigatory interview), or any attempt (either directly or indirectly) to cover-up a violation of the Program through the destruction or concealment of evidence, the creation of fraudulent evidence, the payment of money or things of value to individuals to induce them to lie or refuse to cooperate in an investigation, or the coercion or intimidation of witnesses.

I. Suspensions

1. All suspensions under the Program shall be without pay. Players suspended under the Program shall not receive any pay for the period beginning on the date of the first game of the suspension and ending on the date of the last game of the suspension. Any discipline imposed for a violation of the Program shall be effective on the third business day after the discipline is issued. If a Player appeals the discipline before the effective date pursuant to Section 9 below, the Player's discipline shall be held in abeyance until the appeal is decided.
2. For purposes of this Section 8, a "game" shall include all championship season games and post-season games in which the Player would have been eligible to play, but shall not include Spring Training games, extended Spring Training games or affiliated Winter League games. Any Player who is suspended for a violation of the Program involving a Performance Enhancing Substance shall be ineligible to participate in the post-season during the season in which his suspension begins. A Player suspended for a violation of the Program is ineligible to be elected or selected to any All-Star Game, and this game will not count against a suspension.
3. A Player suspended for a violation of the Program shall be allowed to work out with his Club, participate in Spring Training and extended Spring Training, but shall not be allowed to participate in the Arizona Fall League.

J. Restricted List

1. A Player shall be placed on the Restricted List during the term of any suspension imposed under this Section 8. A Player suspended for a violation of the Program must serve the full suspension with the same Minor League Club for which he was playing at the time the suspension was announced or, in the case of an off-season suspension, the Minor League Club for which he was playing at the end of the prior season. Notwithstanding the foregoing, if a Player's suspension extends beyond the conclusion of the Minor League season in which it was announced (or was announced during the off-season), the Club may transfer the Player during the off-season or Spring Training to the roster of another Minor League Club provided such transfer is for legitimate baseball developmental purposes and is justified by the Player's performance. A Club desiring to transfer a Player from one Minor League roster to another during the pendency of his suspension may not do so absent express consent of the Office of the Commissioner. If a Club desires to transfer a Player from a Short-Season League to a Full-Season League during the pendency of the Player's suspension, the Club must not only submit to the Office of the Commissioner objective baseball evidence to support the transfer, but also must certify that the Club has no present intention of transferring the Player back to a Short-Season roster at any point during the next Minor League championship season. The length of suspension for a Player who is transferred from a Short-Season League to a Full-Season League during the pendency of his suspension shall either remain unchanged or shall increase

to the number of games for which the Player would have been suspended had the discipline been imposed while the Player was assigned to the Full-Season League, whichever results in the lengthier suspension. A Player who is assigned from a Short-Season League to a Full-Season League after his suspension has been announced may not be transferred back to a Short-Season League roster during the forthcoming championship season absent approval of the Office of the Commissioner, which will be granted only in extraordinary circumstances.

2. A Player serving a suspension for a violation of the Program that spans more than one season shall be reinstated from the Restricted List during the intervening off-season, and if the Club does not receive permission from the Office of the Commissioner to transfer that Player to another Minor League roster prior to the start of the next season, the Player must be reassigned at the start of the next season to the Minor League Club to which he was assigned at the end of the prior season and placed again on the Restricted List. A Player suspended for a violation of the Program shall be reinstated from the Restricted List by the Office of the Commissioner immediately at the conclusion of the specified period of ineligibility.

K. Major League Discipline

1. A Player suspended for a violation of the Program who is added to a 40-man roster before such suspension is complete shall be suspended at the Major League level for the lesser of: (i) the remainder of the suspension imposed under the Program; or (ii) the difference between the maximum penalty that could have been imposed under the Joint Drug Program, had each of the Player's violations occurred while he was on a 40-man roster, and the number of games already served by the Player at the Minor League level. If the Player does not serve the entire suspension imposed under the Program while he is on a 40-man roster, the Player will be required to serve the remainder of the original suspension if and when the Player is removed from a 40-man roster.
2. A Player who violates the Program and is not notified of the violation until after his promotion to a 40-man roster shall be treated as if the Player violated the Joint Drug Program. Except as provided in this Section 8.K, a violation of the Program shall not be considered a violation of the Joint Drug Program for any purpose.

L. Multiple Categories of Prohibited Substances

If a single specimen is positive (within the meaning of Section 5.F.1) for more than one category of Prohibited Substance (*e.g.* Stimulant and Drug of Abuse), the Player shall serve the longer of the potential suspensions only. However, for purposes of determining the appropriate level of discipline for future violations, the Player shall be treated as if he was disciplined separately for each Prohibited Substance for which he tested positive.

M. Multiple Disciplines for the Same Use

Players shall not be subjected to multiple disciplines under the Program as a result of the same use of a Prohibited Substance. Whenever a positive test result under the Program could be the result of the same use of a Prohibited Substance that produced a prior positive test result under the Program, MLHPAC shall refer the matter to the laboratory for a determination as to whether, in the laboratory's opinion, the subsequent positive test result was from the same use. MLHPAC will not treat the result as a distinct violation of the Program only if the laboratory concludes to a scientific certainty that the subsequent test result was from the same use of a Prohibited Substance as the prior positive test result.

9. APPEALS

A. Basis for Appeal of Discipline Imposed under Sections 8.A through 8.G

A Player will only be permitted to appeal discipline imposed under Sections 8.A, 8.B, 8.C, 8.D, 8.E, 8.F, and 8.G in the following limited circumstances:

1. Chain-of-Custody: The Player has sufficient reason to believe that the chain-of-custody of his specimen was not properly maintained pursuant to the requirements set forth in Addendum A and that error resulted in an erroneous positive test result. If the Player alleges a deviation from the Program's Collection Procedures, the Player has the burden of demonstrating that the deviation affected the accuracy or reliability of the test result.
2. Laboratory Error: The Player has sufficient reason to believe that the laboratory did not properly administer the testing of the specimen and that error resulted in an erroneous positive test result. If the Player alleges a deviation from the Program's Testing Protocols, the Player has the burden of demonstrating that the deviation affected the accuracy or reliability of the test result.
3. Exceptional Circumstances: MLHPAC, in its sole discretion, may permit a Player to appeal if the Player raises exceptional circumstances on the positive test result.

As set forth in Section 10 below, a claimed entitlement to a Therapeutic Use Exemption is not a proper basis for appeal of a positive test result.

B. Process for Appeal of Discipline Imposed under Sections 8.A through 8.G

All appeals of discipline imposed on a Player pursuant to Sections 8.A through 8.G of the Program shall be subject to the following procedures:

1. In order for a Player's appeal to be considered, the Player must complete and submit an Appeal Request Form, attached hereto as Addendum D, stating the basis for his appeal by 5:00 PM (ET) of the third business day after being informed of the discipline. The completed Appeal Request Form must be sent to the attention of

Jonathan D. Coyles by overnight mail, fax, or e-mail. Mr. Coyles' contact information is as follows:

Jonathan D. Coyles
Office of the Commissioner of Baseball
245 Park Avenue
New York, NY 10167
Phone: (212) 931-7859
Fax: (212) 949-5690
E-mail: jon.coyles@mlb.com

2. Any request for an appeal that is based on grounds other than those set forth in Section 9.A, or is untimely pursuant to Section 9.B.1, will be automatically rejected.
3. If a Player is appealing to MLHPAC pursuant to Section 9.A.2 above and requests that his "B" specimen be tested to support an assertion that the laboratory test result for his "A" specimen was erroneous, the Player will be required to pay for the test before the test is conducted. A check in the amount of \$200 (made payable to Major League Baseball) must be received by the Office of the Commissioner within seven days of the date that the appeal was filed. In the event that the Player's appeal is granted by MLHPAC, the Office of the Commissioner will reimburse the Player for the cost of the test of the "B" specimen.
4. If requested by the Player, and in the discretion of MLHPAC, the Player will be afforded a telephone hearing to allow the Player an opportunity to present any evidence or witnesses that he believes are relevant to the appeal.
5. The telephone hearing conducted by a member or designee of MLHPAC will be informal and non-adversarial. All evidence must be presented by the Player to MLHPAC within 48 hours of the conclusion of the telephone hearing. MLHPAC will make a determination as to whether the discipline should be sustained, modified, or rescinded. A Player's discipline will be held in abeyance until MLHPAC decides his appeal.
6. All decisions regarding appeals of discipline imposed pursuant to Section 8.A through 8.G of the Program shall be in the sole discretion MLHPAC. MLHPAC shall render a written decision to the Club and the Player as soon as practicable, and may sustain, modify or rescind the discipline originally imposed. The decision by MLHPAC shall constitute full, final and complete disposition of the appeal, and shall not be appealable in any forum.
7. If MLHPAC sustains or modifies a suspension, the Club and the Player shall be notified and the Player shall begin serving his suspension immediately. Prior to a decision by MLHPAC, the Office of the Commissioner and the Player's Club will not disclose any information regarding the Player's violation or discipline to the public,

the media or other Clubs. If MLHPAC determines that no discipline is appropriate, all aspects of the hearing shall remain confidential.

C. Appeal of Discipline Imposed by the Commissioner under Section 8.H

All appeals of discipline imposed on a Player pursuant to Section 8.H of the Program shall be subject to the following procedures:

1. In order for a Player's appeal to be considered, the Player must submit a written request stating the basis for his appeal by 5:00 PM (ET) of the third business day after being informed of the discipline. The request should state whether the Player is requesting a telephone hearing pursuant to Section 9.C.3 below. The request should be sent to Jonathan D. Coyles, whose contact information is listed in Section 9.B. above.
2. After receipt of the Player's written appeal request, the Office of the Commissioner will provide the Player or his representative with an oral summary of the evidence upon which the discipline is based. The Office of the Commissioner may, in its discretion, withhold the names of witnesses who were promised confidentiality. Thereafter, the Commissioner will designate a Hearing Officer to conduct a telephone hearing which shall be held within seven days of receipt of the appeal.
3. The telephone hearing conducted by the Hearing Officer will be informal and non-adversarial. The purpose of the telephone hearing is to allow the Player an opportunity to present any evidence or witnesses that he believes are relevant to the allegations. All evidence must be presented by the Player to the Hearing Officer within 48 hours of the conclusion of the telephone hearing. The Hearing Officer will make a recommendation to the Commissioner regarding whether the discipline should be sustained, modified, or rescinded. A Player's discipline will be held in abeyance until the Commissioner decides his appeal.
4. All decisions regarding appeals of discipline imposed pursuant to Section 8.H of the Program shall be in the sole discretion of the Commissioner. The Commissioner shall render a written decision as soon as practicable following the conclusion of such hearing, and may sustain, modify or rescind the discipline originally imposed. The decision by the Commissioner shall constitute full, final and complete disposition of the appeal, and shall not be appealable in any forum.
5. If the Commissioner sustains or modifies a suspension, the Club and the Player shall be notified and the Player shall begin serving his suspension immediately. Prior to a decision by the Commissioner, the Office of the Commissioner and the Player's Club will not disclose any information regarding the Player's violation or discipline to the public, the media or other Clubs. If the Commissioner determines that no discipline is appropriate, all aspects of the hearing shall remain confidential.

D. Confidentiality of Appeal Proceedings

All information associated with or generated by the above appeal procedures is subject to the confidentiality protections of Section 7 of the Program. If MLHPAC or the Commissioner determines that no discipline is appropriate, all aspects of the appeal shall remain confidential. Unless expressly authorized by the Program, neither the Office of the Commissioner nor a Player's Club shall disclose any information obtained in connection with these procedures.

10. THERAPEUTIC USE EXEMPTION

A. Basis for a TUE

A Player authorized to ingest a Prohibited Substance through a valid, medically appropriate prescription provided by a duly licensed physician may apply to receive a TUE for the Prohibited Substance before being tested under the Program. To be "medically appropriate," the Player must have a documented medical need under the standards of care accepted in the United States or Canada for the prescription in the prescribed dosage. The use of a Prohibited Substance to increase "low-normal" levels of any endogenous hormone will not be considered medically appropriate. The Medical Representative will consider, among other factors, whether there is a reasonable therapeutic alternative to the use of a Prohibited Substance and whether the documented medical need is a consequence, wholly or in part, of prior non-therapeutic use of a Prohibited Substance. A specimen which is found to contain a Prohibited Substance will not be deemed a positive test result if such specimen was provided by a Player who was granted a TUE for that specific medication before the collection that resulted in a positive test result. A Player with a TUE for a Prohibited Substance also does not violate the Program by possessing or using the specific medication for which the TUE was granted. Because all TUEs must be granted prior to the collection that results in a positive test, a Player is not permitted to claim entitlement to a TUE as a basis for appealing a positive test result pursuant to Section 9 above.

B. TUE Application Process

1. April 15 Deadline: A Player who applies for a TUE for a Prohibited Substance must submit all required TUE documentation (as described in Section 10.D below) to the Medical Representative by April 15. In order to apply for a new TUE for a prohibited ADD/ADHD medication, a Player must be evaluated and diagnosed with ADD/ADHD by an MLB-Certified Clinician and must submit all required TUE documentation for the prohibited ADD/ADHD medication (as described in Section 10.D.2 below) to the Medical Representative by April 15 of each year.

TUE applications will not be considered after April 15 unless one of the exceptions set forth in Section 10.B.2 below is applicable. If a Player fails to complete the TUE application process prior to the April 15 deadline, he will not be permitted to appeal a positive test result by asserting a right to a TUE; even if he would have qualified for a TUE had he made a timely application.

2. Exceptions to April 15 Deadline: The Medical Representative will only consider a TUE application submitted after the April 15 deadline in the following two circumstances: (i) a Player signs his first Minor League contract of the season after the preceding April 15 deadline (e.g., Player is selected in the First-Year Player Draft); or (ii) a Player receives a first-time diagnosis by a qualified medical professional after the preceding April 15 deadline that requires a medically necessary prescription for a Prohibited Substance (as determined by the Medical Representative). In both of these circumstances, the Player must contact the Medical Representative and receive approval prior to scheduling an appointment with an MLB-Certified Clinician or starting the TUE application process. As stated above, a Player is not permitted to claim entitlement to a TUE as a basis for appealing a positive test result unless a TUE has been granted before the collection which resulted in a positive test.

3. Temporary TUE for ADD/ADHD Medication: If a Player signs his first Minor League contract of the season after the April 15 deadline, and has a documented medical history of ADD/ADHD for which he is being treated with a prohibited ADD/ADHD medication, he may apply for a temporary TUE for that specific medication that will remain in effect during the period in which his TUE application is reviewed by the Medical Representative. Notwithstanding the previous sentence, the maximum effective period of a temporary TUE under these circumstances is 30 days, unless an extension is granted by the Medical Representative for good cause. In order to apply for a temporary TUE, the Medical Representative must be provided with medical documentation establishing the diagnosis and pharmacy records over the previous one-year period verifying the treatment with the Prohibited Substance before the Player begins the regular TUE application process. In order to be granted a temporary TUE, the Player must establish, to the satisfaction of the Medical Representative, both that he has a documented medical history of ADD/ADHD, and that he was being appropriately treated with a Prohibited Substance for the condition prior to the time that he signed his contract. A Player who applies for a TUE after April 15 and uses a Prohibited Substance before a temporary TUE or regular TUE is granted will not be permitted to claim entitlement to a TUE as a basis for appealing a positive test result pursuant to Section 9 above.

C. Duration and Renewal of a TUE

Unless the Medical Representative determines otherwise, the maximum effective period of a TUE runs from April 15 to the following April 14. A TUE is not automatically renewed. A Player must apply for a renewal of the TUE if he is still taking the prescribed medication prior to April 15 of each year. For a TUE granted for a Prohibited Substance other than an ADD/ADHD medication, a Player must submit the necessary documentation to establish that there is a continuing basis and need for the TUE to the Medical Representative between January 15 and April 15. For a TUE granted for a prohibited ADD/ADHD medication, a Player must be reevaluated by his treating physician, and must submit the necessary documentation to establish that there is a continuing basis and need for the TUE to the Medical Representative between January 15 and April 15. Any player who was granted a TUE during the previous season and

has not received a decision regarding his renewal TUE application by the April 15 deadline should contact the Medical Representative about receiving an extension of his previously granted TUE.

D. Required Documentation for a TUE

1. Medication Other Than ADD/ADHD Medication

- a. For a new TUE request for a medication other than an ADD/ADHD medication, the TUE application must contain the following information in order for the TUE application to be reviewed:
 - i. A 2014 TUE application form (attached hereto as Addendum E) completed and signed by the Player's diagnosing physician that includes the results of any evaluations and laboratory testing performed and the diagnosis for which the Prohibited Substance is being prescribed to treat;
 - ii. A Club Physician Affirmation acknowledging that he/she is aware of the Player's prescription, the dosage, and the frequency; and
 - iii. A Prescribing Physician Affirmation that lists the Prohibited Substance that he/she is prescribing, the dosage, and the frequency.
- b. For a renewal TUE request for a medication other than an ADD/ADHD medication, the TUE application must contain the following information in order for the TUE application to be reviewed:
 - i. A 2014 TUE application form (attached hereto as Addendum E) completed and signed by the Player's physician that includes the results of any follow-up evaluations performed over the previous one-year period that indicate a continuing need for the Prohibited Substance;
 - ii. A Club Physician Affirmation acknowledging that he/she is aware of the Player's continued prescription, the dosage, and the frequency;
 - iii. A Prescribing Physician Affirmation that lists the Prohibited Substance that he/she has continued to prescribe to the Player, the dosage, and the frequency; and
 - iv. Pharmacy records over the previous one-year period.

The Medical Representative may request additional information from the Player or his physician after a new or renewal TUE request is received. Any TUE application for a Prohibited Substances used to treat Androgen Deficiency/Hypogonadism or Adult Growth Hormone Deficiency will be subject to the guidelines contained in Addendum F.

2. ADD/ADHD Medication

- a. Long-acting stimulant medications are the only stimulants approved for the treatment of ADD/ADHD in adults by the FDA. As a result, all new TUE applications for prohibited ADD/ADHD medications must be for long-acting stimulants, unless a temporary TUE has been granted for a short-acting stimulant (as described in Section 10.B.3 above). For a new TUE request for an ADD/ADHD medication, the TUE application must contain the following information in order for the TUE application to be reviewed:
 - i. A 2014 TUE application form (attached hereto as Addendum E) completed and signed by an MLB-Certified Clinician that includes the diagnosis and the Prohibited Substance that is being prescribed;
 - ii. The CAADID Parts I and II completed by the MLB-Certified Clinician;
 - iii. A Club Physician Affirmation acknowledging that he/she is aware of the Player's prescription, the dosage, and the frequency; and
 - iv. A Prescribing Physician Affirmation that lists the Prohibited Substance that he/she is prescribing, the dosage, and the frequency.
- b. For a renewal TUE request for an ADD/ADHD medication, the TUE application must contain the following information in order for the TUE application to be reviewed:
 - i. A 2014 TUE application form (attached hereto as Addendum E) completed and signed by the Player's treating physician and the results of any follow-up evaluations performed over the previous one-year period that indicate a continuing need for the Prohibited Substance;
 - ii. A Club Physician Affirmation acknowledging that he/she is aware of the Player's continued prescription, the dosage, and the frequency;
 - iii. A Prescribing Physician affirmation that lists the Prohibited Substance that he/she continues to prescribe, the dosage, and the frequency; and
 - iv. Pharmacy records over the previous one-year period.

The Medical Representative may request additional information from the Player or the MLB-Certified Clinician (or the treating physician in the case of a renewal TUE request) after a TUE request is received.

E. Where to Submit TUE Documents

All TUE documentation is confidential and should be sent to the Medical Representative by e-mail to Non40manTUE@mlb.com.

F. Change in Medication

Because a TUE is granted for a specific medication, a Player must apply for a new TUE if his prescribing physician changes his medication. A Player does not need to submit a new TUE application for a change in medication, but he is responsible for notifying the Medical Representative of the change in medication in writing before taking the new medication. A Player may be subject to discipline if he fails to inform the Medical Representative of a change in medication before being tested under the Program.

11. EDUCATIONAL PROGRAMS AND MATERIALS

MLHPAC, in consultation with the Clubs and outside experts, shall develop educational programs and materials supporting the objectives of the Program each season. MLHPAC's online educational program is available at www.drugfreesport.com/rec. Login instructions for the online educational program are contained in Addendum G. Educational materials will be distributed to all Clubs and Players in Spring Training and throughout each season.

12. COSTS OF THE PROGRAM

Any costs for the treatment and testing of Players on Treatment Programs shall be the responsibility of the Club by whom the Player is under contract. The costs of all other testing conducted under the Program shall be borne by the Office of the Commissioner.