

Clinical EAP Provider Network Manual

**Information
Policy and Procedural Guidelines**

EAP Introduction and Welcome

WELCOME TO THE EAP NETWORK

We welcome you to our EAP network of professionals. We look forward to working with you in the provision of high-quality employee assistance services to our client companies, their employees and their families. This provider manual supplies you and your staff with the information needed to participate in our program.

If you cannot find the answer to a question using the manual, please call the corporate office in Denver at (800) 865-1044.

INTRODUCTION

Our EAP products are full-service, comprehensive employee assistance programs. These programs provide organizational customers with a full range of services including financial and legal consultations, childcare and eldercare referrals, adoption and college information, comprehensive web services and face-to-face counseling for employees and their household members. For its corporate clients, employee orientations to the EAP, supervisory training, critical incident response, case management of management referrals, and other organizational development activities are offered.

Delivering clinical services to an EAP client involves providing the following: crisis intervention, evaluation, coaching, referrals, and short-term problem resolution. The number of counseling sessions available to employees and their household members range from three to eight sessions per problem, depending upon the program purchased by their organization

A PARTNERSHIP FOR QUALITY CARE

It is the policy of EAP to provide efficient, quality, professional services to employees, their household members, and the organizations with which EAP contracts for services. The EAP appreciates your commitment to helping individuals and organizations meet their goals.

Helpful Guidelines

PURPOSE

The Employee Assistance Program is designed to motivate employees and/or their family members to seek help and receive confidential assistance through qualified professional referrals before there is a decline in the employee's job performance.

ACCESS

There are four ways in which an employee or their household members may become involved with the Employee Assistance Program:

1. Employees may contact the EAP directly to voluntarily seek information, referral, and related services on a confidential basis.
2. Members of an employee's household may also contact the EAP directly to obtain information and assistance on a confidential basis.
3. Employers are encouraged through training and consultations to refer employees to the EAP for assistance when job performance problems arise, standards of conduct are violated or personal problems are identified. These "management referrals" may involve communication by the EAP with the referring organization about the employee's compliance and follow through.
4. Employers may require an employee to be assessed by the EAP as a condition of continued employment, as determined by company policy. This is typically associated with high-risk work environments and job descriptions. This is called a "mandatory referral" and is case managed by the EAP. The EAP will ask a provider to evaluate and make specific recommendations for the best intervention related to the employee's problems.

COVERED SERVICES

All behavioral health diagnoses and V-codes are covered under the EAP benefit. There are some services that are beyond the scope of EAP such as medication evaluation, psychological and neuropsychological testing, inpatient services, partial hospitalization services, group therapy, drug testing, and court-adjudicated treatment. The EAP Provider is expected to conduct a current assessment, supply clinical services and offer referrals for services. Providers may self-refer when clinically indicated to allow for continuity of care.

CONFIDENTIALITY

Confidentiality is a very sensitive and complex issue in all EAP work. The norms of professional practice required by the ethics of various behavioral health professions, license requirements, and state and federal statutes apply to EAP practice. The use of standardized release of information forms and other recognized confidentiality practices are expected.

In any case involving an employee referred by their employer for assessment and/or counseling (a “management” referral) or as a condition of continued employment (a “mandatory” referral), the employee will be asked to sign a Release of Information form. This release allows the EAP to disclose information to the employer regarding their employee’s compliance with clinical recommendations. **Providers are asked to take special care in explaining to the employee that the EAP cannot release information to their employer without this signed release of information. As the coordinator of information and communications between the provider, employer and employee, the EAP will need a copy of this form and will manage all contacts with the employer.**

PAYMENT FOR SERVICES

EAP sessions are free of charge to the employee and his/her household members.

Providers are to collect fees for EAP clinical services from the EAP directly and are not to seek payment from EAP clients or their health insurance.

MEETING EMPLOYERS’ NEEDS

With an EAP, **the contracting employer is as much a client as the person receiving counseling.** It is important for providers to be aware of potential role complications whenever an issue involving an employer is the focus of counseling. The EAP is available for consultation with providers for these and all cases.

CALL RESPONSE

It is the EAP’s policy that Providers contact referred individuals within 24 hours of the EAP referral.

ROUTINE REFERRALS

The waiting period for a non-emergency appointment should not exceed five business days.

URGENT REFERRALS

Urgent referrals require an assessment within 24 hours of accepting the referral.

EMERGENCY RESPONSE AND BACK-UP PLANS

PROVIDERS ARE EXPECTED TO HAVE CLEAR CRISIS AND BACK UP COVERAGE PROCEDURES IN PLACE AND INFORM CLIENTS OF THESE PROCEDURES AT THE FIRST FACE-TO-FACE CONTACT.

RECORD MANAGEMENT

Client records should conform to all applicable federal, state, and professional society regulations for behavioral health records.

The disposition of each case should be documented in each client file. Include referrals and outreach efforts, particularly if a client terminates unexpectedly or there are risk issues.

EAP AUTHORIZATIONS AND REFERRALS NOT GENERATED BY THE EAP

Employees or household members of employees who contact providers directly should be directed to the EAP for benefit approval, case opening, and authorization for services. **Please be aware that the EAP is unable to pay for services that are not pre-authorized.**

DOCUMENTS AND MANUALS

Providers may call the corporate office (Denver, CO) at (800) 865-1044 to request that updated manuals or documents be sent to them.

Referring EAP Clients for Additional Services

Referrals to community-based services are strongly encouraged. Experience has shown that there is a high occurrence of requests for services requiring a non-therapeutic referral. We encourage providers to consider all resources available to the client.

The EAP also provides childcare and eldercare referrals, adoption and college information, comprehensive web service, and legal and financial consultations to our EAP employees. The provider may refer the employee back to the EAP for these services.

ADDITIONAL BEHAVIORAL HEALTH SERVICES

The EAP's practice is to provide clinical services that most appropriately meet employees' needs, which often includes making referrals to providers who are able to provide continuity of care. Therefore, we attempt to match employees with Providers who are contracted with the employee's behavioral health insurance. Providers are expected to freely communicate with their EAP clients regarding the treatment options available to them. When making a referral, the EAP Provider should help the client understand how their insurance system works, both financially and operationally.

Providers may make referrals to themselves if clinically appropriate and if allowed by the employee's health plan. If the provider and employee choose to continue treatment together a "Freedom of Choice Information Form" should be given to the employee and care management transferred from the EAP to the health insurance benefit. Providers must be contracted with the Health Plan and follow the authorization procedure for insured treatment.

Important: EAP authorizations pertain to EAP services only and do not apply to treatment services covered by health insurance plans.

GLOSSARY OF EAP TERMS

1. AMERICAN WITH DISABILITY ACT (ADA)

The ADA is a federal civil rights statute, passed in 1992, that prohibits employers with 15 or more employees from discriminating against a person who has a disability or who is perceived to have a disability in any aspect of employment. Under the ADA, a person with a disability is a person who has an impairment (physical or mental) that substantially limits one or more of the individual's major life activities. Mental illness, recovering drug users, learning disabilities, and retardation are interpreted to be disabilities under the ADA Act. Employers are required to make "reasonable accommodations" for known physical or mental limitations of otherwise qualified individuals unless doing so imposes an "undue hardship" on the employer. The ADA also prohibits employers from refusing to hire someone or discriminate against someone because that person is related to or associates with someone with a disability. The ADA also prohibits harassment against the people described above. The ADA prohibits retaliation against people who assert their rights under the ADA.

2. ASSESSMENT

An assessment is a structured evaluation conducted by a licensed mental health provider and/or an EAP professional to identify an employee/client's personal problems. The assessment concludes with concrete recommendations and referrals that address the employee/client's problems.

3. AUTHORIZATIONS

An authorization is an official approval of EAP benefit coverage for a plan of treatment for the purpose of allowing the treatment provider to be covered by reimbursement for services.

4. CASE MANAGEMENT

Case management consists of an EAP clinical professional facilitating, coordinating, monitoring, and providing quality assurance of care to an employee who is referred by their company for EAP services. The EAP offers this service in conjunction with a management or mandatory referral of an employee by their company. The EAP clinical professional provides feedback on the employee's compliance with the clinical assessment and recommendations to the company representative, after the employee has signed a release of information form.

5. CEAP

A CEAP is a certified employee assistant professional. To acquire certification an individual must hold a master's degree in a mental health field and complete course work and supervision specific to EAP services.

6. CHAIN OF CUSTODY

A Chain of Custody is a set of procedures and forms for the tracking, handling and storage of breathe, urine, blood, or hair specimens obtained by drug or alcohol testing. The events establish ownership of the specimen at all times, from completion of the test to the reporting of the results.

7. COLLECTION SITE

A collection site is the location where individuals provide a specimen of breath, blood, urine or

hair to be analyzed for the existence of drugs or alcohol.

8. COMPLIANCE

Compliance is a term used to refer to the EAP employee/client's follow-through with an assessment and /or an EAP professional's clinical recommendations made for resolving the employee/client's problems.

9. CONSULTATION OR MANAGEMENT CONSULTATION

A management consultation in EAP practice means the act of giving advice and guidance to Management, Human Resources and/ or Union representatives concerning the management of behavioral and performance problems in the work place. This may include coaching a supervisor on how to refer an employee to the EAP or other appropriate resources.

10. CONTINUITY OF CARE

Continuity of Care is an uninterrupted flow from EAP to behavioral health services intended to provide a smooth transition with minimal disruption in a client's treatment.

11. CO-PAYMENT

Co-payment is a predetermined payment that a member in a health plan makes for an office visit with a mental health or medical provider. EAP services are paid for by the client/employee's company therefore, they do not have co-pays.

12. CRISIS INTERVENTION

Crisis intervention is an immediate, intensive helping process of an individual experiencing a crisis. This process includes engaging the individual, assessment, building employee/client support, planning, contracting, and possibly giving a referral for face to face counseling or emergency care.

13. CRITICAL INCIDENT

A critical incident is an extraordinary episode that interferes or has the potential of interfering with an individual's ability to psychologically cope with the event. Natural disasters, workplace accidents or violence in the workplace are examples of a critical incident.

14. CRITICAL INCIDENT MANAGEMENT

Critical incident management involves assessing the critical event and its impact on the workplace, and determining the best method for responding to the employees and the company impacted by the event. The response can involve educating employees about trauma phases through handouts sent to the workplace, employees being individually referred to the EAP, a psycho-educational group or a formal de-briefing (C.I.S.D.) at the workplace.

15. CRITICAL INCIDENT STRESS DEBRIEFING (C.I.S.D.)

A C.I.S.D. is a structured, confidential, group discussion that supports individuals impacted by the trauma to share their reactions, feelings and thoughts about the incident. The process normalizes the symptoms and educates the individuals on the process of recovery and refers them to appropriate follow up services. A C.I.S.D. is usually scheduled at the worksite following the traumatic event.

16. DISCIPLINARY PROCESS

A disciplinary process is a progressive course of corrective actions taken to improve job performance or work behavior that is based on organizational policies. There are usually four steps involved in corrective action: verbal warning, written warning, suspension and termination.

At each step the manager or supervisor may refer the employee to the EAP to resolve personal problems that may be impacting them at work or for coaching on behavioral issues in the work place. Acceptance of the EAP referral by the employee is voluntary.

17. DOCUMENTATION

Documentation refers to the written record of visible or measurable features of an employees work performance and behavior. Documentation may also record any corrective actions taken by the employer regarding work performance or behavior.

18. DRUG-FREE WORKPLACE ACT

The Drug-Free Workplace Act was adopted of 1988 and requires all employers who have federal contracts valued at \$25,000 or more annually, or who receive grants, to maintain a drug-free work environment. Some of the requirements of this act are:

1. Notify employees that unlawful manufacturing, distribution, possession, or use of controlled substances is prohibited in the workplace per company policy. The employer must also state the actions that will be taken for violating this statute.
2. Institute a drug-free awareness program that informs employees about the danger of drug abuse in the workplace, available drug counseling, rehabilitation and EAPs.
3. Give each employee a copy of the drug-free workplace statement and policy.
4. Notify employees that the drug-free workplace statement is a condition of employment on the contract or grant. The employee must abide by the terms and notify the employer of any criminal drug statue conviction for a violation occurring in the workplace within five days of the conviction.
5. The company will notify the contracting agency within ten days after receiving information from an employee about a drug conviction.

19. DRUG TEST

A drug test is a method companies use to identify and measure the presence of alcohol and/or illegal and legal drugs in a person's body. An initial drug test is designed to identify specimens above a specified concentration of alcohol and specific classifications of drugs established by the company. A second, confirmatory drug test is conducted after the initial test if the level is above the specified concentration.

20. EAP CORE PROGRAM

An EAP core program is a worksite-based program designed to help identify and resolve problems associated with employees that may affect job performance or behavior in the workplace. EAPs provide assistance for behavioral health and substance abuse assessments through face to face counseling; crisis intervention; childcare, eldercare, financial, legal and work - life referral and information; critical incident management; and training and consultation for employees and supervisors. The core activities of an EAP include: 1) expert consultation and training in the identification and resolution of job performance or workplace behavioral

problems; 2) confidential, appropriate and timely assessment services for the employee and their household members; 3) referrals for appropriate diagnosis and treatment or support services; and 4) follow-up services for employees who use the service.

21. EMPLOYEE ORIENTATION

An employee orientation is a meeting to inform employees about the EAP services offered by their organization. The topics discussed in the meeting include EAP procedures, information about accessing the services and confidentiality issues.

22. EXTERNAL EAP

An external EAP is a freestanding EAP business that contracts with a work organization to provide EAP services to employees and their household members. EAP personnel are not employed by the work organization.

23. FEE-FOR-SERVICE

Fee-for-service is a defined amount paid for a specific service compared to a pre-determined contracted amount paid for a service.

24. FITNESS FOR DUTY

Fitness for duty is a term used to determine an employee's physical and mental ability to perform particular work functions. Fitness for duty procedures may entail medical and/or psychological evaluation, or drug testing of an employee displaying unusual behavior. EAPs are often called upon for assessments and recommendations for the return to work process, but do not usually determine fitness for duty themselves. EAPs can also assist employers in locating and setting up formal fitness for duty evaluations that are at the employer or employee's expense. An EAP may suggest that, in certain cases, a formal fitness for duty evaluation is indicated.

25. FOLLOW UP

Follow up involves one or more contacts with an EAP client to monitor compliance with recommendations, referrals to treatment resources, progress, and for determination of appropriateness/adequacy of treatment. Follow up is a monitoring and case management process. It is generally conducted by telephone contacts.

26. HARASSMENT

Harassment involves unwanted remarks or offensive behavior by one or more persons against another person (s). These behaviors can have sexual, racial or other implications.

27. HUMAN RESOURCE (HR)

Human Resource is the department that manages the employee relation functions in that organization.

28. HUMAN RESOURCE

Human resources is a term used to refer to the employees of an organization. The term implies that the employees are honored as human capital and are a very important asset of the organization.

29. INTERNAL EAP

Internal EAP refers to an EAP in which the EAP staff is also employees of the work organization. The EAP staff provides services to their own company.

30. INTERVENTION

A workplace intervention refers to a process for dealing with an employee with observed and documented performance problems or inappropriate behavior in the workplace.

31. LAST-CHANCE AGREEMENT

A Last Chance Agreement is a signed agreement between an employee and an employer that states a specific performance plan and/or other stipulations for employment; this may include compliance with EAP recommendations.

32. MANDATORY REFERRAL

Mandatory referral is an employee referral made by a manager/supervisor due to job performance problems and/or work place behavioral issues. In a mandatory referral the employee is required to comply with the EAP assessment and recommendations as a condition of their employment. The organization must have written policies and/or precedent for this referral. Government regulations and risk management policies are often the reasons for a mandatory referral.

33. MANAGEMENT REFERRAL

A management referral of an employee is a strongly recommended referral made by a manager/supervisor to the EAP for assessment and recommendations concerning job-performance and/or work place behavior. A manager may also refer an employee to the EAP when the employee asks for support or appears distressed.

34. MEDICAL REVIEW OFFICER (MRO)

A medical review officer is a physician trained to analyze laboratory results from alcohol and drug tests conducted as part of a company's policy or government regulations. The MRO interprets and assesses positive test results.

35. MONITORING

Monitoring refers to the part of case management that involves the EAP professional contacting the employee and documenting his/her progress and compliance with recommendations made in a prior formal assessment.

36. QUALITY ASSURANCE

Quality assurance is the process of appraising the performance of services provided by the EAP internally and externally. This process involves preventive safeguarding and employing changes for improvement.

37. REENTRY/REINTEGRATION

Reentry/reintegration is the process for helping an employee, who was on leave for behavioral health or substance abuse treatment, return to the workplace and acceptable job performance. The EAP usually consults with both the employee and HR manager about the reentry process.

38. REFERRAL

Referral is the procedure of connecting the employee asking for services (counseling, legal or financial consult, childcare, eldercare, etc.) with the service provider. An EAP staff member facilitates the referral and briefs the service provider on the employee's issue.

39. REASONABLE SUSPICION

Reasonable Suspicion is an alcohol and/or drug test conducted immediately after a manager suspects an employee of intoxication or being under the influence of drugs at the workplace. Specific behavioral signs of intoxication and/or drug are used to help the manager determine the need for a drug test.

40. RISK MANAGEMENT

Risk management is the planning and implementing strategy used for reducing an organization's risk for safety factors that may pose a threat to employees or the organization.

41. SAFETY-SENSITIVE POSITION

Safety-sensitive positions are jobs that involve high safety risk to self, property or the general public. Examples of jobs that are considered safety-sensitive include ironworkers, utility jobs, transportation, defense, and machinery jobs.

42. SEXUAL HARASSMENT

The Equal Employment Opportunity Commission (EEOC) defines sexual harassment as "unwelcome sexual advances, request for sexual favors, and other verbal or physical contact of a sexual nature." It is a violation of federal law, Title VII of the 1964 Civil Rights Act as amended in 1972.

43. SHORT TERM PROBLEM RESOLUTION

Short-term problem-resolution is a psychotherapeutic intervention used for problems indicated by assessment that can be resolved in a few clinical sessions

44. SUPERVISOR REFERRAL (SEE MANAGEMENT REFERRAL)