

ACCESS ONE
Employee Assistance Program

EAP

Provider

Handbook

2007



Partnership for Families, Children and Adults

Table of Contents

Understanding AccessOne Employee Assistance Program (EAP)	2
Your Role as an AccessOne EAP Provider	2
Access and Eligibility for EAP	3
Defining EAP Services	3
Crisis Intervention	
Complete Assessment	
Solution-Focused Brief Counseling	
Referral to Appropriate Care	
Awareness of the Dual Client Relationship	
Follow-up	
Critical Incident Stress De-Briefing (CISD)	
Threat of Violence/Risk Assessment and Intervention	
Management consultation	
Staff/Supervisory Training	
Types of Referrals	5
Self Initiated	
Supervisor Initiated	
Timeframes for EAP Service Delivery	6
Emergent	
Urgent	
Routine	
Pre-Paid Services	7
EAP Record Retention	7
HIPAA	7
Limitations to EAP	8
Legal Issues	8
Confidentiality	
Release of information	
Requests for information	
Data Collection	9
Billing Policies and Procedures	9
AccessOne EAP Forms	10

AccessOne Employee Assistance Program PROVIDER HANDBOOK

Understanding *AccessOne* Employee Assistance Program (EAP)

AccessOne EAP is designed to assist work organizations in addressing productivity issues, and employees in identifying and resolving personal concerns that may affect job performance. *AccessOne* offers timely and confidential problem identification and assessment services for employees and their families. Sometimes, short-term, solution-focused intervention can be provided, and is sufficient to support healthy functioning and avert workplace disruption. When more intensive and focused intervention is called for, *AccessOne* providers make that decision quickly, and collaborate with the employee and the benefit plan in developing a cost effective and clinically appropriate treatment path.

Your role as an *AccessOne* EAP Provider

As an *AccessOne* provider, you contribute to healthy workplace functioning by conducting precise, comprehensive assessments with eligible applicants, so that effective solutions can be developed and achieved. *AccessOne* seeks providers with excellent assessment skills.

It is important that an *AccessOne* provider be generalists; that is, able to work with applicants of all ages, capacities, and motivation levels; and who may present with a wide variety of issues.

AccessOne providers must meet the following criteria.

- A. Possess at least one of the following:
 1. A masters degree, with an emphasis on clinical practice, from an accredited school of social work education.
 2. A masters or doctoral degree in clinical or counseling psychology
 3. A masters degree in a field relevant to mental health and substance abuse counseling, and experience in counseling, which together meet the legal requirements for the clinical practice which they are providing in the state or province in which the provider is located.
- B. Possess any applicable required licensure by state appropriate to assignment. In Tennessee, the provider must be a Licensed Employee Assistance Professional (LEAP); or be licensed by the Tennessee Health Related Board charged with the licensure and regulation of social work, mental health, and/or substance abuse counseling.
- C. Upon request, provide documentation of continuing education or contact hour licensure requirements met in the past two years.
- D. Thorough knowledge of local treatment providers and community resources.
- F. Professional liability insurance of \$1 million/occurrence, \$3 million/aggregate.
- G. Provide a safe office environment that accommodates the communication and access needs of individuals with disabilities.

Access and Eligibility for EAP

AccessOne providers are requested to accept eligible applicants referred by *AccessOne*, and identify a professional staff member as point of contact for *AccessOne*. This staff member will provide all needed assistance to eligible applicants.

Applicants for EAP services are required to present verification of employment at intake. This can be a company identification badge, paycheck stub, or an insurance card. Under no circumstances should an *AccessOne* provider contact a company directly to verify eligibility. Questions regarding EAP eligibility of dependents or household members may be directed to *AccessOne*.

Defining EAP Services

AccessOne services to the customer organization include the following:

Crisis Intervention

AccessOne has 24-hours a day, 7 days a week accessibility, with an on call professional available at all times.

AccessOne providers must have a protocol for 24 hour crisis response, and advise *AccessOne* of their protocol.

Complete Assessment

AccessOne providers perform a complete assessment on every applicant, to include:

- Precipitating events
- Risk factors
- Impact on the workplace
- Acuity vs. chronicity of presenting problem
- Personal relationship concerns
- Medical concerns
- Treatment history
- Financial and legal issues
- Substance abuse inventory
- Behavioral health plan benefit requirements and availability of services.

As a result of the assessment, a determination is made as to whether the presenting problem can be resolved within the allowed EAP visits.

Solution-Focused Brief Counseling

EAP interventions are short-term, focused, stem directly from the assessment, and identify goals that can be achieved within the brief format of EAP. Documentation must support the identified issues and the goals, and progress is best described in functional terms.

Referral to Appropriate Care

Problems that are chronic or recurring, or that require medical monitoring or specialized treatment are not appropriate for EAP intervention. When service needs fall beyond the scope of EAP, the provider must work closely with the applicant and the behavioral health benefits plan to identify providers for referral.

AccessOne providers are expected to maintain a list of clinicians and treatment programs that accept insurance reimbursement, as well as a listing of low fee community based resources.

Awareness of the Dual Client Relationship

AccessOne providers have two customers: the employee/family member seeking services, and the customer organization that pre-paid for the EAP. Services are therefore *dually focused* on helping employees, and on improving their workplace performance. The dual client relationship obligates the *AccessOne* provider to neutrality and confidentiality on behalf of both customers. It is not helpful to collude with an employee against the employer. The goal is to preserve the employee's ability to function effectively at the workplace, to preserve their employment and workplace productivity.

***AccessOne* providers are not to communicate directly with the customer organization unless specifically authorized to do so by *AccessOne*.**

Follow up

After completion of the EAP assessment or brief counseling, all EAP clients must receive some follow-up contact from their *AccessOne* provider. When a referral is made, the *AccessOne* provider makes follow-up contact with the client to assure that the appointment is kept, and that the services received are satisfactory and appropriate. Every effort is made to maintain contact with the EAP client until successful engagement in follow-up care is achieved. It is essential that follow-up contact be documented in the case record.

There must also be documented follow up with clients who fail to keep scheduled appointments or drop out of EAP. If there is no follow up with a client who does not complete EAP assessment/brief counseling, there must be documentation of the reason why follow up was contraindicated.

Critical Incident Stress De-Briefing (CISD)

You may be asked by *AccessOne* to provide on-site intervention in response to threats, incidents of violence, industrial accidents, natural disasters, deaths etc., to assist those affected in coping with the impact of the trauma. CISD requests sometimes require a same-day response that could disrupt scheduled appointments. *AccessOne* staff will work closely with you in arranging your on-site intervention.

Threat of Violence/Risk Assessment and Intervention

Applicants are to be screened for potential harm to self or others. The *AccessOne* provider is expected to be competent in identifying risk potential and have a working knowledge of state and federal laws related to duty to warn. If you have any questions, contact *AccessOne*. **If your clinical assessment indicates that there is child/elder abuse that must be reported, a threat of violence that indicates an exception to confidentiality exists, or immediate need to notify police, please also notify *AccessOne*.**

Management Consultation

Managers sometimes seek assistance in dealing with troubled employees or workplace conflict. If such contact is authorized by *AccessOne*, the service is rendered as a courtesy, and is not billable to *AccessOne* or to the customer organization. If you and the manager conclude that a supervisor initiated EAP referral is indicated, refer to the section **Types of Referrals**, and contact *AccessOne* to obtain authorization.

Due to confidentiality, *AccessOne* will not ask you to communicate with a manager if the troubled employee in question is a recipient of EAP services.

Staff/Supervisory Training

There may be occasion when a customer organization requests on-site training for employees or supervisors in issues that impact workplace performance. If you have a particular area of training expertise, please notify *AccessOne*, who will contact you if training requests are received that you may be qualified to provide.

Types of Referrals

Self Initiated

The applicant directly accesses EAP services. These services are confidential.

Supervisor initiated

Requests from managers/supervisors are given priority. Mandatory referrals may involve a penalty to the employee for noncompliance.

1. Informal – The employer advises the employee of availability of EAP services, suggesting the EAP may be helpful. The employee's participation is voluntary and confidential.
2. Formal – the employer refers the employee and expects confirmation from *AccessOne* that the employee participates. There is no penalty if the employee does not, but performance issues are expected to be addressed, and performance problems are expected to improve. The EAP provider will obtain an authorization for release of information to the employer so that the employee's attendance can be confirmed.

3. Mandatory – the employee’s job status is contingent upon completing treatment recommendations. The employer expects feedback on employee treatment compliance from *AccessOne*. The authorization to release information will include information about services related to the mandatory referral. *AccessOne does not make decisions about continuing to work, or returning to work. These decisions are made by the employer. AccessOne providers are not to communicate directly with the supervisor/employer, but rather must provide the information about treatment recommendations and compliance to AccessOne. Requests from employers for information regarding mandatory referrals must be redirected by the provider to AccessOne.*

Timeframes for EAP Service Delivery

Appointments must be offered within the timeframes listed below:

Emergent

- Behavior that prompts urgent action by others, such as violent or self injurious behavior, threats of harm to self or others, failure to care for oneself, deterioration of mental status, and/or bizarre or confused behavior.
- The applicant is in danger of decompensate, may be suicidal/homicidal, and/or unable to care for self due to acute or chronic psychiatric condition.
- A life threatening condition in which the person is suicidal/homicidal, with a plan, means, and intent to commit the act; or is actively psychotic, displaying disorganized thinking, or reporting hallucinations and delusions which may result in self harm or harm to others; and/or is unresponsive and unable to care for self; and/or is assaultive, destructive, or self injurious and/or at a risk of property damage.

***Response Time:** Immediate response by phone and same day appointment offered if appropriate, and referral made to Crisis Response if indicated. Client may also be directed to the nearest emergency room, and the emergency room notified of their pending arrival.*

Urgent:

- The severity or nature of presenting symptoms is significant but not life threatening to the patient, or anyone else.
- Severe emotional distress may be present in response to a major life event.
- Client may be functionally disabled or emotionally liable but not dangerous to self or others.
- Client may have thoughts of suicide or homicide but denies having a plan, means or intent
- Client expresses feelings of hopelessness, helplessness or rage, and without diversion and intervention will likely progress to an emergent need for services and care.

***Response Time:** Immediate response by phone and Client offered appointment within 36 hours.*

Routine:

- Client presents no immediate distress and can wait to schedule an appointment without any adverse outcomes.
- Client is in mild to moderate distress.
- Client describes signs and symptoms resulting in impaired functioning of life tasks, and/or markedly decreased quality of life.

Response Time: Client is offered an appointment in 3 business days as required by, *AccessOne* Letter of Agreement guidelines.

Pre-Paid Services

AccessOne services are pre-paid by the customer organization. Employees who access their EAP expect confidential and timely appointments at no cost to themselves. The *AccessOne* provider is not to bill the client or employer for any service whatsoever. No show's cannot be billed to *AccessOne*, or to the client/family member.

EAP Record Retention

AccessOne case records must be made available to *AccessOne* administrative personnel upon request.

Providers are expected to have a written policy regarding record storage that is in accordance with the applicable state and federal laws concerning retention of medical records.

AccessOne may conduct record reviews to monitor the quality of EAP service provision. Providers will be notified of cases to be reviewed.

HIPAA

AccessOne providers are expected to comply with obligations under the Health Insurance Portability and Accountability Act of 1996 in the following ways:

- a) The provider is thoroughly familiar with the requirements of HIPAA, and has a plan for training all employees in HIPAA compliance.
- b) The provider cooperates and coordinates with all business associates and their privacy officers in implementing privacy policies and practices.
- c) The provider mutually provides and signs documents that protect health information as required by HIPAA.

Limitations to EAP

As an *AccessOne* provider, you are not to become involved in any of the following:

- Fitness-for-duty evaluations
- Worker's compensation claims
- Lawsuits by the client against the customer organization or *AccessOne*
- Evaluations for lawsuits
- Referrals to yourself or to organizations in which you have a financial interest
- Direct contact with the customer organization/employer

If a client or employer requests any of the above, please contact *AccessOne* immediately.

Legal Issues

Confidentiality

As an *AccessOne* provider, you are responsible for maintaining the confidentiality of all client information and must be knowledgeable regarding any applicable state and federal laws that mandate confidentiality, or impact upon a client's rights to confidentiality (such as reporting requirements in cases of child/elder abuse).

Release of Information

The disclosure or release of client information in any form (including acknowledging that an individual is currently, or ever was, in treatment) to a third party is prohibited unless the client has delivered a properly executed authorization for release of information, or the party requesting such information has delivered a court order (signed by a judge), *not* a subpoena. If you have questions, contact *AccessOne*.

AccessOne has a specific release for Mandatory Supervisory referrals, which can be found at the end of this handbook.

Requests for Information

Notify *AccessOne* of any requests for information about a client.

Data Collection

AccessOne demonstrates the effectiveness of our EAP services through statistical reporting. Information from the data you provide is compiled in a way that keeps client information confidential, but that substantiates the value of the service our customer organizations have purchased.

AccessOne requests data on a quarterly basis regarding the following:

- Hours of counseling provided by problem category
- Total number of employees served per customer organization
- Total number of dependents served per customer organization
- Total number of clients referred to outside services/institutions, and any in-house organizational trends noted
- Utilization by the number of clients and the number of visits per client.
- Closed cases that resulted in successful problem resolution within the scope of EAP

The sample reporting form can be found at the end of this document, and is due by the 15th of the month following the end of the quarter (January, April, July and October).

Billing Policies and Procedures

AccessOne requires that you submit invoices on a monthly basis (submit once a month for all sessions that occurred in the preceding month). Reimbursement rates can be found in your *AccessOne* Letter of Agreement. Invoices must be received by the 15th of the following month in order to be reimbursed.

The only required *AccessOne* form is the Problem Identification Report, which must accompany the first billing only. You may use any invoicing material that you or your agency typically utilizes. Submit all invoices to:

AccessOne Employee Assistance Program
Partnership for Families, Children, and Adults
1800 McCallie Avenue
Chattanooga, TN 37404

If you have any questions regarding the information contained in this Provider Handbook, please do not hesitate to call *AccessOne* at 1-800-568-6294 or 423-697-3808.

SAMPLE
AUTHORIZATION FOR RELEASE OF INFORMATION TO
SUPERVISORS
AND HUMAN RESOURCE PROFESSIONALS

EMPLOYEE NAME: _____

I AUTHORIZE _____ (PROVIDER) TO RELEASE/ EXCHANGE INFORMATION REGARDING MY MANDATORY SESSIONS WITH MY EMPLOYEE ASSISTANCE PROGRAM. THE INFORMATION THAT IS RELEASED WILL BE SHARED WITH _____ (NAME OF SUPERVISOR OR HUMAN RESOURCES PROFESSIONAL) ONLY.

MY SUPERVIROR NEEDS TO KNOW THE FOLLOWING REGARDING MY COURSE OR COMPLETION OF COUNSELING: (SUPERVISORS PLEASE CHECK ALL THAT APPLY.)

___ MY ATTENDANCE AT FIRST SESSION

___ MY ATTENDANCE AT FOLLOWING SESSIONS

___ COUNSELOR'S ASSESSMENT REGARDING WORK ISSUES

___ TREATMENT PROGRESS

___ FOLLOW UP TREATMENT RECOMMENDED OR REFERRAL RECOMMENDED

___ OTHER NEEDED INFORMATION (BE SPECIFIC.)

I UNDERSTAND THAT THE PURPOSE OF THIS MANDATORY REFERRAL AND RELEASE OF INFORMATION IS FOR ME TO SUCCESSFULLY COMPLETE MY CORRECTIVE ACTION AT MY PLACE OF EMPLOYMENT.

THIS CONSENT IS VALID UNTIL _____.

I UNDERSTAND THAT I MAY REVOKE (IN WRITING) THIS CONSENT AT ANY TIME, EXCEPT TO THE EXTENT THAT ACTION HAS ALREADY BEEN TAKEN ON IT.

IT HAS BEEN EXPLAINED TO ME THAT, IF I REFUSE TO CONSENT TO THIS RELEASE OF INFORMATION, THE FOLLOWING ARE THE CONSEQUENCES (SPECIFY, IF ANY): _____

CLIENT/ EMPLOYEE SIGNATURE: _____ DATE: _____

CLIENT/EMPLOYEE NAME (PRINTED): _____

WITNESS SIGNATURE: _____ DATE: _____

NOTICE TO RECEIVING AGENCY/ PERSON: YOU MAY NOT REDISCLOSE ANY OF THIS INFORMATION UNLESS THE PERSON WHO CONSENTED TO THIS DISCLOSURE SPECIFICALLY CONSENTS TO SUCH REDISCLOSURE. UNDER THE FEDERAL ACT OF JULY 1, 1975, CONFIDENTIALITY OF ALCOHOL AND DRUG ABUSE PATIENT RECORDS, NO SUCH RECORDS, NO INFORMATON FROM SUCH RECORDS, MAY BE FURTHER DISCLOSED WITHOUT SPECIFIC AUTHORIZATION FOR SUCH REDISCLOSURE.

Mandatory Supervisory Referral Form

Name of Caller: _____ Company: _____

Name of Employee To Be Referred: _____

Specifically, what did the employee do to get referred to the EAP?

What are your expectations of the EAP?

Would you like to be contacted after the first appointment? Yes or No

What is your phone number? _____

Would you like a letter from the clinician regarding this referral? Yes or No

What is your address? _____

Releases of information are needed for:

1. _____ (Explanation of Duty To Warn ____)
2. _____
3. _____

Internal Checks: Please initial.

___ I explained to the supervisor and he/ she understands that we cannot release any information until we see the client and get the release signed. I explained that he/ she needs to keep in contact with the employee to find out when the first session is scheduled.

___ I asked the supervisor to make the employee aware of sanctions or consequences of not following through with the EAP.

___ I made a copy of this form for both the Provider and the EAP Manager.

**AccessOne EAP
Provider Data Collection Form**

Provider Name _____ Quarter 1 2 3 4

Hours of counseling provided by problem category # _____

# of Hours	Problem	#of Hours	Problem

Total number of employees served per customer organization # _____

EAP Company	# of employees	EAP Company	# of employees

Total number of dependents served per customer organization # _____

EAP Company	# of dependents	EAP Company	# of dependents

Total number of clients referred to outside services/institutions, and any in-house organizational trends noted # _____

#Clients referred to outside services	In-house organizational trends

Utilization by the number of clients and the number of visits per client # _____

EAP Company	Cases Opened	Number of Visits	EAP Company	Cases Opened	Number Of Visits

Closed cases that resulted in successful problem resolution within the scope of EAP # _____

EAP Company	Cases Closed	EAP Company	Cases Closed	EAP Company	Cases Closed

--	--	--	--	--	--