

EMPLOYEE ASSISTANCE PROGRAM AFFILIATES

Many employees report that managing the demands of work and home is stressful and challenging. Studies have repeatedly demonstrated that employees who experience high levels of stress at home or work are more likely to be tardy or absent, will use more health benefits, are less productive, are involved in greater accidents and will experience greater turnover. *VOC* is pleased to offer Employee Assistance Programs (EAPs) to our client accounts that have contracted with us to deliver this service to members.

Benefits of an Employee Assistance Program

- A valuable employee benefit, especially when properly promoted and communicated
- Emphasizes early intervention when confronting a variety of work/life issues
- Encourages employees and managers to take action early rather than later
- Offers easy access to professional and confidential assistance
- Typically offered at no charge to employees or their immediate household dependents
- Addresses personal problems that are often not covered by any other benefit programs, such as substance abuse, mental health, marital, child and eldercare concerns, legal and financial difficulties, etc.

EAP services are for the employee who less often presents with serious clinical issues, but rather with a series of life challenges. The EAP provides assistance with clarification of the problem, development of an organized approach to problem solving, and identification of both personal and available community resources that can be utilized to reach that goal.

VOC is committed to helping employees cope with issues as quickly and efficiently as possible. The EAP is distinct in its *workplace focus*, and is designed to:

- Quickly identify and respond to employee and dependent personal problems
- Help employees restore and maintain high levels of productivity
- Reduce absenteeism, tardiness and accidents that may result from personal problems that impact employee performance
- Help employers retain valuable employees
- Improve management's ability to recognize and respond decisively to employees who are experiencing alcohol and other drug abuse-related problems that impact performance
- Provide a means for employees and their families to access help in a crisis or when personal problems interfere with their performance and/or quality of life
- Reduce overall health care costs

General Guidelines for EAP Affiliates

These general guidelines help providers understand the unique requirements of EAP service delivery for *VOC* covered employees and dependents.

- The range of EAP services typically includes assessment and referral, problem-solving and/or short-term intervention, depending on the presenting problem(s) and the service design selected by the employer.
- EAP services should always begin with a thorough assessment of the presenting problem(s) to determine if an EAP intervention is appropriate or if more intensive care is indicated.

- The assessment should result in the formulation of an EAP Service Plan. Service goals and plans should be objective and measurable.
- For employees in crisis, the typical goal of EAP is the restoration of the employee's satisfactory level of functioning through rapid linkage and follow-up with appropriate services, including the coordination of benefits when appropriate.
- The role of the EAP clinician is active and often directive, particularly during a crisis. *VOC* recommends that sessions be focused on discussing solutions, building on strengths, accessing support systems and utilizing community resources when appropriate.
- EAP counseling is typically present-centered and does not seek extensive exploration or attempted resolution of long-term family of origin issues.
- A DSM-IV diagnosis is not a requirement to obtain services, but such a diagnosis does not preclude treatment through the EAP. Severity and intensity of symptoms and/or presenting problems combined with the available number of sessions under the employee's benefit design may be a better indicator of appropriateness for EAP than diagnosis.
- *VOC* EAP Care Managers handle all communications with supervisors in the event of management-based referrals for performance problems.
- Affiliate providers should **never** communicate directly with employers or other persons unless authorized by *VOC*.
- EAP Affiliates must immediately report to *VOC* all critical incidents and cases which are potentially threatening to the member, the customer organization, or the EAP.

Member Rights and Responsibilities

- Members have the right to receive services in a way that does not stigmatize or jeopardize employment;
- Members have the right to be treated equitably and without favoritism;
- Members have the right to receive services in a manner that is sensitive to the diverse and unique needs related to age, gender, sexual orientation, physical limitations, culture and religious preferences of each member;
- Members have a responsibility to notify EAP Affiliates if unable to attend a scheduled appointment;
- Members have a responsibility to read and understand the Statement of Understanding and the EAP Affiliate's Notice of Privacy Practices; and
- Members have a responsibility to behave in a manner that is not threatening or violent to those around him/her.

EAP Guidelines

An Employee Assistance Program (EAP) is a workplace-sponsored program designed to assist in the identification and resolution of productivity problems associated with employees and/or family members impaired by personal concerns. These concerns may include, but are not limited to:

- marital and/or family issues
- financial or legal problems
- child or elder care concerns
- alcohol and/or drug abuse
- emotional well-being
- health issues
- work-related concerns

These concerns may be adversely affecting an employee's job performance, attendance and/or safety.

The specific core activities of EAP services include assessment, brief-focused consultation or referral for appropriate diagnosis, treatment and assistance. Additionally, EAP may assist in linking employees, their families with available community resources that provide necessary services, follow-up and a wide range of employee support services.

The following are intended as guidelines only, to assist in the determination of an appropriate candidate for EAP services following the initial evaluation by an EAP affiliate. Given the wide array of EAP support services available to eligible members, it should be recognized that while EAP services may not always be the most appropriate intervention, it can and should be considered an adjunct to more intensive levels of intervention.

Problems Appropriate for EAP Services

Individuals presenting with the following problems may, after an initial assessment, be appropriate candidates for EAP as the primary service option.

Psychosocial/environmental concerns:

- job/occupational issues
- financial/legal problems
- child/elder care
- career planning
- marital/family issues
- relationship issues
- grief/loss
- concern about another's substance abuse
- compulsive behaviors (e.g., Internet use, shopping, gambling)

Clinical problems related to:

- anxiety
- depression
- mood disorders
- phobias
- gambling
- eating disorders
- hyperactivity
- learning disability
- substance abuse

Individuals with the above concerns *may*, after an initial assessment, be appropriate candidates for EAP services, provided:

1. The purpose of EAP intervention is time-limited and focused on problem resolution within a given session model; or
2. The purpose of EAP intervention is assessment, referral and education of a member in the process of coordinating alternative levels of sustained care.

Substance Abuse Issues

Individuals presenting with certain substance abuse/dependency issues may be appropriate candidates for EAP as the initial service option when an employee receives a formal, mandatory or regulatory referral (depending on company policies and federal regulations) into the EAP by the employer or supervisor. The referral may result from a/an:

- positive random drug or alcohol screen
- positive for-cause drug or alcohol screen
- positive post-accident drug or alcohol screen
- fitness-for-duty related issue
- internal policy/procedure requirement of the client company
- self-referral

In addition, the EAP can be of assistance when an individual has relapsed and the most appropriate intervention is education and referral to appropriate support systems.

Referral for Specialized Treatment

Individuals presenting to *VOC* with the following problems may, after an initial assessment, require a referral for specialized treatment due to the complexity and/or urgency of their clinical situation:

- Individuals with psychotic symptoms
- Clinical conditions that require possible inpatient admission
- Psychiatric assessments needed prior to an admission to a psychiatric hospital, partial hospitalization program or residential treatment center
- Individuals presenting with substance dependence requiring stabilization in a structured program setting
- All diagnostic dilemmas, therapeutic dilemmas and complex psychiatric conditions
- Individuals whose clinical presentation leads the affiliate to suspect that a cognitive disorder may exist
- Individuals with unstable medical conditions with behavioral components
- Individuals in need of psychotropic medications or a medical consultation
- Individuals needing post-hospital medication follow-up
- Chronic relapsing illnesses with a history of previous hospitalization
- Individuals who have recurrent illnesses and/or a pattern of going from one crisis to another and have not been responsive to short-term intervention

Core Technology Functions

Since EAP services are, by design, broad in scope, the following represents the Core Technology Functions of EAP service delivery as defined by the Employee Assistance Professionals Association (EAPA):

- Consultation with, training of, and assistance to work organization leadership (managers, supervisors and union stewards) seeking to manage the troubled employee, enhance the work environment and improve employee job performance; and, outreach to and educate employees and their family members about availability of EAP services.
- Confidential and timely problem identification/assessment services for employee clients with personal concerns that may affect job performance.
- Use of constructive confrontation, motivation and short-term intervention with employee clients to address problems that affect job performance.
- Referral of employee clients for diagnosis, treatment and assistance, plus case monitoring and follow-up service.
- Consultation to work organizations in establishing and maintaining effective relations with treatment and other service providers and in managing provider contracts.
- Consultation to work organizations to encourage availability of and employee access to employee health benefits covering medical and behavioral problems, including but not limited to, alcoholism, drug abuse, and mental and emotional disorders.
- Identification of the effects of EAP services on the work organization and individual job performance.

Code of Ethics

EAP Affiliate providers are expected to practice and behave in a manner consistent with the Employee Assistance Program Association (EAPA) Code of Ethics and to avoid conflicts of interest in carrying out EAP responsibilities.

Regulatory and Legislative Developments

It is the responsibility of the EAP Affiliate to keep abreast of relevant regulatory and legislative developments impacting EAP practice.

Affiliate Self-referral

An affiliate self-referral is defined as a situation in which an EAP affiliate accepts and evaluates an eligible member in a case originating through the EAP, and then provides ongoing treatment for the member for mental health problems as part of the member's mental health plan managed by *VOC*.

Historically, EAPs were designed as assessment and referral-only programs with a workplace focus. Over time, some programs offered brief, solution-focused service models as well. To prevent any possible conflict of interest between the needs of members and the affiliate, most employer plans required EAP affiliate to refer to a different provider any employee who needed care beyond the EAP. Today, even though most referrals into outpatient benefit plans are monitored for medical necessity, many customers still prefer that EAP providers not refer to themselves for ongoing care. EAP Affiliates may not self-refer for on-going therapy unless approved in advance by *VOC*. *VOC* makes determinations regarding self-referrals on a case by case basis. Requests for mental health treatment will be certified if it is clinically

appropriate and if the EAP Affiliate is appropriately qualified to provide the treatment. In making the determination, *VOC* will consider the following:

- The member's eligibility for *VOC* or *VOI* MH/SA benefits.
- If the EAP Affiliate is also contracted under the MH/SA network.
- The Plan clinical criteria for access to mental health benefits.
- The EAP Affiliate's expertise in any clinical specialty relevant to the provisional diagnosis.
- Any known client philosophy regarding self-referral

It is important that EAP affiliates clearly understand their role when they accept a case as an employee assistance counselor, and that they explain their role and its limitations at the *first meeting* with an employee.

EAP Referrals Requiring More Extensive Care

Employer organizations are typically presented with a menu of EAP program options and select the service design that best fits the needs of their employees and the organization. This means that one employee may be eligible for only a one to three-session assessment and referral model, while employees of another organization may be entitled to as many as eight sessions in a brief short-term counseling model.

VOC EAP Care Managers assess incoming calls to the EAP based upon the program design and the severity of presenting problems before referring to the EAP. Face-to-face evaluation by the EAP affiliate may uncover additional needs that clearly exceed the limitations of the EAP. In such cases, EAP affiliates should contact their referring EAP Care Manager sooner rather than later to facilitate a referral to the appropriate level of care. *VOC* strongly discourages EAP affiliates continuing to see employees through the EAP when it becomes clear that the employee is in need of long-term or specialty care, unless the sessions are clearly used for purposes related to an EAP's role, such as work-related issues, while long-term services can be arranged. While it may be appropriate for the EAP affiliate to utilize an additional session to explain their findings and recommendations to an employee, it is inappropriate to attempt to engage individuals in therapy when services cannot reasonably be concluded within the remaining EAP session allowance.

Getting Started

EAP Member Access

Important traditional elements of an EAP include the problem-solving nature of the EAP and an immediate response to EAP member calls for assistance. In order for EAP member assistance to occur as soon as possible upon the initial call to *VOC*, your role as an EAP affiliate is essential and critical. A solid link between *VOC*, EAP affiliates, and EAP members requires twenty-four hour telephone access for EAP members – seven days a week – with easy access to a statewide network of EAP affiliates

EAP members may access a team of *VOC* professional staff during regular business hours. After hours, calls are handled by EAP Care Managers (California licensed RNs) at a designated *ValueOptions* call center handling *VOC* after hours calls. EAP members access *VOC* services via a dedicated toll-free number.

It is critical that access priority be given to members with urgent needs or in emergency situations (Refer to the Emergency and Urgent Appointment Access section below.).

Types of EAP Member Referrals to EAP Affiliates

In general, all referrals to contracted EAP Affiliates will be made by a *VOC* EAP Care Manager. EAP Affiliates will be notified of all referrals.

The notification will include the type of EAP referral (defined below) and any particular information that will assist the Affiliate in the delivery of services to EAP members.

Self-referral: an employee or eligible EAP member requests EAP services. *VOC* will notify the affiliate that the EAP member will be calling for an appointment, or in some instances when possible, a "warm-transfer" of the member will be made to the Affiliate.

Formal Referral: a "formal" recommendation is made by the work-site representative for an employee to access EAP services, with no potential job jeopardy for non-compliance. The referral is for an employee who is exhibiting job performance problems and the work-site representative is requesting feedback regarding an employee's compliance with the EAP recommendations. A signed release of information is obtained from the employee to facilitate dialogue with the work-site representative. The EAP Affiliate provides an assessment and reports recommendations to the referring EAP Care Manager. EAP Affiliates *should never* communicate directly with employers even if contacted by the employer, unless authorized by *VOC*. If there are specific work-related issues that require attention by the EAP and/or coordination with the member's employer, a *VOC* EAP Care Manager should be notified.

Mandatory Referral: a directive is given by the work-site for an employee to access EAP services with *potential job jeopardy* for noncompliance. A signed release of information is obtained from the employee to facilitate dialogue with the worksite representative regarding attendance to the EAP appointment and cooperation with the recommendations as a result of the EAP assessment. The EAP Affiliate provides an assessment and reports recommendations to the referring EAP Care Manager. EAP Affiliates *should never* communicate directly with employers even if contacted by the employer, unless authorized by *VOC*. If there are specific work-related issues that require attention by the EAP and/or coordination with the member's employer, a *VOC* EAP Care Manager should be notified.

Eligibility Information

VOC will verify EAP eligibility prior to referring an EAP member to you.

If an EAP member presents to your office and was not referred by *VOC*, please call the *VOC* office prior to seeing the member. Be prepared to provide *VOC* with the following:

- Employer's name
- EAP member's name, date of birth and Social Security Number

Employer Group (Client) Information

When *VOC* refers an EAP member to an affiliate, the following client-specific information is provided:

- The number of EAP sessions available and other service specifics
- Any appropriate policies regarding substance abuse/compliance with regulatory agency requirements
- Information regarding the origin of the referral (i.e., self, formal or regulatory referral)
- *VOC* EAP Care Manager's name and toll free number

- Information on other ancillary services for which the member is eligible if the need arises, e.g. legal and financial services, work/life services, Web services

If you are unable to provide the needed services, please promptly notify the member and advise *VOC*.

Scheduling Appointments

Routine Appointments

- Routine appointments should be offered to EAP members within seven (7) calendar days of the initial referral date.

Emergency and Urgent Appointments

- All EAP Affiliates may be asked to handle emergency and urgent appointments. These emergency and urgent assessments should be conducted on an immediate basis and *VOC* will coordinate them at the time the referral is made.
- If an EAP Member believes that he/she has an emergency medical or behavioral condition, they should get care immediately by going to the nearest hospital emergency room or calling 911. An EAP Affiliate must promptly provide an appropriate referral whenever an EAP member is experiencing an emergency.

EAP Affiliates are encouraged to make available appointment times before, during or after traditional work hours and at least one evening per week.

Affiliate Responsibilities to EAP Members

Notice of Privacy Practices

EAP Affiliates are required to make available in a visible area in the office, at each new member contact and upon request, a Notice of Privacy Practices in accordance with the Health Insurance Portability and Accountability Act of 1996 (HIPAA).

Collecting and Sharing Confidential Information

It is important to impress upon all EAP members that EAP counseling services are completely confidential. Confidentiality is also an important professional and administrative aspect of *VOC* policies and procedures. Participating EAP Affiliates are responsible for ensuring that they have the necessary EAP member written consent before any information is released to any third party except as required to comply with any applicable state or federal law. *VOC* recommends the use of the *VOC* “Authorization for Use or Disclosure of Medical Information” form located as an attachment to this manual. This authorization form is designed to meet the requirements of all federal and legal mandates.

EAP affiliates *must* obtain approval from *VOC* prior to releasing any information. Except under rare circumstances, EAP Affiliates will not have any contact with employers. Such contact, when necessary, will be handled by *VOC* EAP Care Managers. EAP Affiliates should *never* contact an employee at home or at work without prior approval from the employee. Affiliates must also be careful not to release information or acknowledge EAP involvement to other members of an employee’s family unless all parties have directly participated in the case.

Note: Disclosures must be indicated in the Affiliate's notes and filed in the clinical record with copies of any forms relating to confidentiality and release of information. Also, the EAP member's refusal to sign any release or other statement must be documented by the Affiliate. VOC may request a copy of a member's case records.

Obligation to Report/Duty to Warn

Participating EAP Affiliates must comply with all applicable state and federal laws regarding confidentiality, child/elder abuse, and other reporting or "duty to warn" laws. It is the EAP Affiliate's responsibility to understand and comply with the professional and legal requirements in California.

The duty to warn may override the usual right to confidentiality of which an individual is assured when speaking to a clinician. This applies to any EAP Affiliate receiving information from an EAP member. If an EAP Affiliate believes that an EAP member represents a threat to others, the EAP Affiliate may need to take steps to warn a third party, in accordance with California statutes or judicial interpretation of the law. It is preferable to contact the police, but the EAP affiliate may need to warn the intended victim by telephone if that is the best way to assure the potential victim's safety. Threats to self should be handled in a similar manner in order to protect a person from harm. VOC must be notified immediately of the threat and the steps taken to notify victim and/or law enforcement. EAP Affiliates should consult with VOC if the level of threat is unclear.

Statement of Understanding

The Statement of Understanding explains to the client how the EAP works and emphasizes the confidential nature of these services. The form *must* be reviewed with the EAP member and signed at the beginning of the initial face-to-face session. If a member refuses to sign, the Affiliate should write "Refused to Sign" on the Statement of Understanding, attach it to the file, and document in their notes for the record as well as on the Case Activity Form (CAF).

Grievances and Provider Disputes

VOC has established processes for receiving and resolving member and EAP Affiliate concerns.

Telephone Inquiries: If a member or an Affiliate has an administrative question or inquiry regarding eligibility, benefit coverage, or any other matter relating to the EAP Program, *VOC* should be contacted at the client specific telephone number on the member's ID card.

Grievances: EAP Affiliates agree to abide by, and cooperate with, *VOC* Grievance Process and to participate in *VOC* procedures to resolve any grievances filed by EAP Members. All grievances will be responded to within thirty (30) calendar days of receipt by *VOC*.

Expedited Grievances and Clinical Appeals: *VOC* has established a process for an expedited review of cases involving an imminent and serious threat to the health of a member, including but not limited to severe pain, potential loss of life, limb, or major bodily functions. Affiliates or members may request an expedited Grievance review by contacting *VOC*. Within 72 hours from receipt of a request requiring expedited review, *VOC* will notify the Affiliate and member of the disposition or pending status of the Grievance.

The grievance process, a printable grievance form, and instructions for submitting grievances on-line are described in more detail in the member section of the valueoptions.com web site.

Provider Dispute Resolution Process: *VOC* has a provider dispute resolution process that is intended to provide for the fast, fair and cost-effective resolution of provider disputes. Provider disputes may be submitted to the *VOC* Provider Dispute Department, which can be contacted by telephone at the client specific telephone number printed on the member's identification card or at (866) 501-0777 or by mail at P.O. Box 6065, Cypress, California 90630-0065. Copies of the provider dispute resolution policy are available on the *VOC* regional website section at [ValueOptions Provider Online Service: Network: ValueOptions of California](#) or from *our* Provider Dispute Department.

Intake Protocols

The *VOC* EAP Care Manager provides the member with information on his/her EAP benefit including number of sessions and any enhanced services for which the member is eligible.

The initial intake should include first and foremost an assessment of any emergency needs requiring immediate attention. Additional intake methods are based on the services provided by the EAP and the needs of members. The initial assessment is based upon clinical guidelines. The EAP Affiliate obtains necessary clinical and non-clinical information. This assessment, which should cover the following areas, will assist in making an appropriate referral:

- a. Member demographic information;
- b. The nature of the request or presenting problem including stressors, precipitants and severity of symptoms;
- c. Self-report of any work-related issues (attendance, work history, problems with co-workers, job jeopardy, disability leave);
- d. Safety issues as a result of job classification such as working in a safety-sensitive and/or government-regulated work environment, e.g., DOT, DOE, NRC;

- e. Assessment of risk to self or others, and
- f. A diagnosis, as applicable.

Following the intake or initial interview, the EAP Affiliate identifies whether to retain the case for short-term counseling as allowable under the EAP benefit, or refer the case to outside or approved resources for ongoing treatment. EAP Affiliates who are unable to provide the needed services should promptly notify the member and advise *VOC*.

Clinical Assessment Protocols

Due to the nature of the referral, some information listed below may not be applicable in every case.

The EAP assessment should focus on problem identification and an appropriate action plan. Special consideration should be taken to appropriately assess substance abuse, depression and risk to self and others. Assessments conducted by EAP Affiliates includes the following:

- EAP member's demographic, education, employment, work and military history information
- Presenting vs. assessed problems (both primary and secondary)
- History of assessed problems
- Evaluation of environment and home situation
- Psychosocial history
- Alcohol and drug history and current use
- Evaluation of past or present addiction issues and treatment
- Medical history, including date of last medical exam and any current medications
- Physical illness or somatic complaints
- Evaluation of past or present mental health issues and treatment
- Religion or spiritual association, if appropriate
- Ethnic or cultural issues, when appropriate
- Financial status and health insurance, if appropriate
- Legal, vocation and/or nutritional needs of the member, if appropriate
- Social and peers group supports
- Interests, skills and aptitudes
- Behavioral/cognitive patterns that cause health risks, based on physical, emotional, behavioral or social conditions
- Evaluation of safety issues and overall assessment of risk
- Impact of problem on job performance
- Disability/Worker's Compensation history including current status
- Short and long term goals
- Diagnostic impression on all five axes based on the DSM-IV including V-Codes (optional)
- Global Assessment of Functioning (GAF)
- If short-term counseling is to be provided, there should be a service plan, including behavioral and measurable goals, which builds on the strengths of the member.

When the member is a victim of abuse or neglect, the EAP Affiliate should intervene with more intensive services and provide more frequent monitoring and coordination with the *VOC* EAP Care Manager.

The EAP Affiliate is encouraged to administer standardized assessment tools as indicated and appropriate

to help with the proper service provision and/or referral to meet the member's needs.

VOC expects that EAP Affiliates have detailed procedures in place to address back-up and support in managing cases that involve threats of violence, including homicidal or suicidal ideation.

Developing EAP Session Goals

Critical to EAP service delivery is the development of session goals between the EAP affiliate and member. Session goals are objective, incremental, and measurable targets that are used to evaluate achievements toward problem resolution during the course of employee assistance program (EAP) involvement, whether the service is assessment and referral or short-term problem resolution focused.

Service planning and delivery must meet the diverse and unique needs and preferences of members. These may be related to age, sex, gender, sexual orientation, physical limitations, ethnicity, culture, and other characteristics.

The formulation of an objective, incremental, and measurable goal plan can be made easier by following the steps below:

Identify the problem.

Problem descriptions relate to the symptoms or complaint presented by the member. A problem statement is one in which the symptom or complaint is described in behavioral terms.

Establish goals that are objective.

Describe the action that is required to resolve the problem in observable terms. The expected behavior will need to be measurable in observable behaviors.

Establish goals that are incremental.

Be specific and detailed. Goals need to be easily attainable to encourage success. By breaking a task into its parts, members become conscious of success.

Establish goals that are measurable.

Once the goal is described, identify where, when, and how often this behavior should occur for the goal to be completed.

Establish a target date for achievement.

Determine how long it may take to achieve the goal or resolve the problem.

Review progress and the goal plan.

Periodically review the session goals. Have the goals been achieved? Does the treatment plan need modification?

Follow-up Requirements

EAP affiliates must coordinate follow-up activities with *VOC* EAP Care Managers. Follow-up activities are specific to the type of referral and treatment modality. For example, for inpatient needs, a return to work and/or discharge planning conference should be held with the EAP member prior to return to work. EAP Care Managers will advise Affiliates of specific follow-up requirements.

Record-keeping Requirements

Participating EAP affiliates must establish a separate file for every case upon first contact with an EAP member. This file should reflect services provided for each session and the time and date of each session rendered. Record entries contain only the information that is necessary to properly serve the member. All record entries for services are completed, signed, and dated by the person who provided the service.

The EAP Case Record must contain:

- Demographic information on the client, including age, sex, and ethnicity
- A statement of the presenting problem, as appropriate to the service provided;
- The results of any assessments;
- Service plans;
- Progress notes*;
- A detailed account of the supervision or case consultation, including data for the recommendations and actions taken, and including the signature of the EAP Affiliate and supervisor**;
- Follow-up action plans, and
- A closing summary***

When necessary due to the nature of individual needs and/or the type of service being provided, basic information is supplemented by psychological, medical, or biopsychosocial evaluations.

*Progress notes for each contact must include the following:

- Date and type of contact
- Duration of contact
- Current functioning and risk assessment
- Assessment of EAP member progress toward established goals
- Plan of action to be taken including discharge plan and follow-up
- EAP member's response to presented action plan

All EAP records are the property of *VOC* rather than the EAP Affiliate except as otherwise provided by applicable law. In addition, EAP Affiliates should maintain records in a secure location to which only the EAP Affiliate has access. *VOC* may audit EAP Affiliate records as needed in compliance with accrediting standards and regulatory requirements.

**Supervision or case consultation occurs between the EAP Affiliate and a supervisor experienced in EAP who possesses at least two years of supervised post-graduate experience in counseling. Supervision or case consultation emphasizes the member's progress toward achieving goals and objectives, the safety and well-being of the member, the quality of documentation in client records and consultation around any critical incidents. EAP Affiliates are encouraged to contact a *VOC* EAP Care Manager for consultation regarding difficult or complex case issues.

***Closing summary notes must include:

- A report of changes in condition regarding the assessed problem;
- Recommendations for further action by the client and employer; and
- Referral or recommendations for any future services, as appropriate.

The EAP Case Activity Form serves as the member case record. This form must be completed and returned to *VOC* minimally at case opening and case closing. The Case Activity Form may be submitted during the intervention phase of services.

The EAP Affiliate screens his or her member hard copy and electronic records for un-summarized notes, observations, and impressions, and other material that should be expunged at the closing of the record, and at least annually and in accordance with legal, state, and federal record keeping mandates.

VOC, its authorized representative(s), the California Department of Managed Health Care, and other governmental agencies authorized by law are permitted access to EAP records for the purposes of:

- a. Program oversight, evaluation, and quality improvement;
- b. Assisting in the transfer of EAP records from one Affiliate to another; and
- c. Other reasons as specified in the EAP Affiliate Agreement.

EAP Affiliates must maintain the confidentiality of all records and information in compliance with *VOC* policies and procedures and the requirements of state and federal laws and regulations, including the California Confidentiality of Medical Information Act, California Civil Code Section 56 et seq. The EAP Affiliate must also maintain records in accordance with federal and state legal mandates addressing member access to records, amendments to records and documentation of disclosures of protected health information. Additional information regarding EAP Affiliate obligations related to maintaining records is described in the *VOC* EAP Affiliate Agreement.

The Americans With Disabilities Act

VOC expects participating EAP Affiliates to comply with all provisions of The Americans with Disabilities Act (ADA) and other federal, state or local laws or municipal codes applicable to EAP services. Services should be handicap-accessible for physically, visually, and hearing impaired members. The EAP Affiliate adapts its environment to the special needs of members. Accessibility of services is an integral component to meeting need equitably. The EAP Affiliate should attempt to deploy and adapt its facilities so that they are usable by all those in need and otherwise eligible. This includes providing or arranging for communication assistance for persons with special needs, who have difficulties making their service needs known, by providing assistance such as a computer, telephone amplification, sign language services, or other communication methods to facilitate service.

Office Environment

The physical environment of the EAP Affiliate office should reflect the EAP Affiliate's commitment to provide comfort and dignity to members and personnel of diverse backgrounds and ages.

The EAP Affiliate should also maintain a service environment that is safe, clean, free of hazards, smoke free, child-friendly and professional. EAP Affiliates should ensure sufficient office space to protect client and counselor confidentiality and maintain procedures to ensure that office, grounds and overall facilities are safe and secure for clients and personnel 24 hours a day.

For facilities, offices, and grounds that are regularly used, rented, or owned, the EAP Affiliate maintains a permanent file of reports, including incident reports that demonstrate its compliance with all:

- a. Certification of occupancy requirements;
- b. Zoning and building codes;
- c. Occupational safety and health administration codes;
- d. Health, sanitation, and fire codes; and
- e. All other applicable safety codes.

The EAP Affiliate conducts and documents:

- a. regular fire drills and inspections and preventative maintenance to ensure the safety of its premises, equipment, and fixtures; and
- b. a review of the office or location's safety systems including fire safety and fire extinguishers, emergency exits, lighting, and other mechanisms that identify hazardous conditions monthly or in accordance with federal, state, local or municipal requirements. (Note: "Hazardous conditions" include, but are not limited to, such conditions as: uncovered electrical outlets; unsecured floor coverings or equipment; stairs without handrails; harmful water temperatures; inadequacy of light, ventilation and temperature; unscreened areas or unmarked glass doors; and unsafe use of electrical appliances and objects, such as space heaters, radios, or toys that are used by children or others who may be vulnerable.)

The EAP Affiliate follows prudent anti-crime procedures to ensure that all buildings, grounds, and facilities are safe and secure for members and personnel. Examples of prudent anti-crime procedures include, but are not limited to, the use of dead-bolt doors, panic alarms, entrance bells, congregate working areas to improve safety, and other security linkages.

The EAP Affiliate is encouraged to have procedures for responding to accidents, fire, medical emergencies, water emergencies, natural disasters, and other life threatening situations that address the needs of persons with special needs; specify evacuation procedures and appropriate responses to medical emergencies; address voluntary or involuntary closure of the office in emergency situations; and notification of members and *VOC* in the event of catastrophic events.

The EAP Affiliate is encouraged to consider the accessibility, availability and affordability of public transportation, the location of area community resources and the special needs of actual or potential members within the Affiliate's geographic area.

Affiliate Participating Provider Responsibilities

Administrative Responsibilities

Recredentialing and Information Updates

To assure accurate and timely changes to our EAP Affiliate records, *VOC must receive prompt written notification* of any additions, deletions or changes (including the effective dates) related to any of the following:

Recredentialing

- Verification of current state licensure or certification (annually)
- Verification of current Certified Employee Assistance Professional designation (CEAP)
- Verification of current individual malpractice liability insurance with limits, dates of coverage and provider's name
- Current resume/curriculum vitae (every two years) with special emphasis on substance abuse assessment and referral and EAP service provision

- Any pending legal, administrative or licensure action not previously reported
- Verification of work in a work in a clinical practice for a minimum of 10 hours per week.

Updated Information

- Tax identification numbers
- Address and telephone numbers
- Name changes
- Newly acquired areas of expertise
- New service sites and/or deletions of others

Terminations and Agreement Amendments

Terminations

Either *VOC* or a participating EAP Affiliate may choose to terminate the *VOC/EAP* Affiliate Agreement in accordance with the provisions described in the Agreement.

Continuation of Care Upon Termination

When an EAP Affiliate resigns or is terminated from the network, the EAP Affiliate must continue to provide covered services, at the rate and pursuant to the requirements specified in the EAP Affiliate Agreement and to adhere to *VOC* policies and procedures, to members under the care of the Affiliate at the time of termination until the earlier of : (a) *VOC* notification that *VOC* has arranged for the assumption of such EAP Services by another Affiliate; or (b) completion of such EAP Services.

Special Circumstances Continuing Care Obligations

Following the termination of the *VOC*. EAP Affiliate Agreement for reasons other than medical disciplinary cause or reason, fraud or other criminal activity, the EAP Affiliate shall, at the request of the applicable member and in accordance with *VOC* policies and procedures, continue to provide covered services in Special Circumstances to members as described in this section. EAP Affiliates shall continue to provide covered services in Special Circumstances to members, at the rates and pursuant to the requirements specified in the Agreement, at the time of termination of the Agreement until the course of treatment is completed in accordance with the time periods listed below. This section shall not require *VOC* or EAP Affiliates to cover services or provide benefits that are not otherwise covered under the terms and conditions of the member's *VOC* Group EAP Agreement.

- **Time Periods for the Provision of Covered Services in Special Circumstances**

Acute Conditions: Completion of covered services shall be provided for the duration of the acute condition or until the member's benefits are exhausted, whichever comes first.

Serious Chronic Conditions: Completion of covered services shall be provided for a period of time necessary to complete a course of treatment and to arrange for a safe transfer to another EAP Affiliate, as determined by *VOC* in consultation with the member and the terminated EAP Affiliate and consistent with good professional practice. Completion of covered services shall not exceed 12 months from the provider's contract termination date or until the member's benefits are exhausted, whichever comes first.

Newborn Child: Completion of covered services shall not exceed 12 months from the EAP Affiliate's contract termination date or until the member's benefits are exhausted, whichever comes first.

Surgery/Other Procedure: Performance of a surgery or other procedure that is authorized by *VOC* as part of a documented course of treatment and has been recommended and documented by the EAP Affiliate to occur within 180 days of the Affiliate's contract's termination

Upon completion of EAP services, all originals and copies of *VOC* copyright and proprietary documents, including this manual, must be returned immediately to the *VOC* office.

Agreement Amendments

- *VOC* will notify the EAP Affiliate in writing of any amendments to the *VOC*/EAP Affiliate Agreement prior to the effective date of the amendment. Specific provisions related to Agreement Amendments are described in the EAP Affiliate Agreement.

Participating EAP Affiliate Coverage

A participating EAP affiliate must notify *VOC* immediately by phone regarding any situation where he or she is unable to maintain a case. A participating EAP Affiliate must notify *VOC* in writing regarding any situation where he or she is unable to take referrals. Failure to notify *VOC* may result in inappropriate referrals to Affiliates and unnecessary delay for employees seeking assistance. Additionally, *VOC* must be contacted regarding any alternative Affiliate coverage arrangements.

Clinical Consultations

In order for EAP members to receive the required standard of care, a cooperative relationship between *VOC* and all EAP Affiliates is necessary. To facilitate this relationship and the shared commitment for high quality and cost-effective EAP services to EAP members, EAP Affiliates are encouraged to call the *VOC* EAP Care Manager who referred the EAP member for case consultation as necessary.

- The EAP Affiliate shall report all required information to *VOC*. Difficult cases should be discussed with the *VOC* EAP Care Manager to jointly determine the most appropriate service intervention, possible service plan(s), and referral resources.

Open and Inactive Case Definitions

Cases may remain open for three (3) months after the last contact with the EAP member if no other follow-up is planned. Generally, after this period of time, the case becomes inactive (except for some substance abuse cases). Cases taken out of inactive status must be updated via the case notes.

Termination of the EAP member's employment does not remove the case from inactive status. An EAP member may refuse services at any time and request that we place their case on an inactive status.

Case records will be retained for a period of six (6) years from the date the case becomes inactive. The complete chart will be disposed of by a means in accordance with state and federal laws and regulations, which results in its complete destruction. No materials may be retained from the charts for personal/research purposes.

No-show Policy

The first missed appointment should be documented as such. You may call the EAP member to reschedule another appointment, depending upon client group specific preferences. Two consecutive "no shows" do not require a call to the EAP member but will require proper documentation. Job performance and DOT referrals that are "no show" will always require *VOC* notification and documentation. See "Billing for Missed Appointments".

EAP Responsibilities

Workplace Emphasis in EAP Assessment

By design, the EAP assessment is structured, brief and very focused. What makes an EAP unique and most valuable, by definition, is its workplace emphasis. Therefore, in addition to the assessment of clinical factors, worksite factors (e.g., employment data, job functioning) and non-clinical problems or concerns (e.g., work related issues, financial issues) will also be identified, defined and prioritized in the EAP assessment.

A thorough EAP assessment helps to ensure that presenting and assessed problems are recorded, compared, and reflected in aggregate reporting. Comparisons will often demonstrate the value of the EAP assessment process.

Additionally, work history information is especially important for job performance-based referrals. So whenever possible, work history and job issues for performance referrals should be discussed with the *VOC* EAP Care Manager prior to an EAP member's initial scheduled visit to the EAP affiliate.

Job Performance-based Referral Coordination

An EAP Affiliate will receive information on EAP member disciplinary action and other job issues through the *VOC* EAP Care Manager. Any updated or previously unreported information needs to be coordinated between *VOC* staff and the EAP Affiliate. The *VOC* EAP Care Manager will validate any additional information or pertinent changes.

EAP Affiliates should never communicate with the employer, unless authorized by VOC staff.

Provider Referral Coordination

If assistance is needed beyond the EAP visits allowed in the session model, the EAP Affiliate should call the *VOC* EAP Care Manager to facilitate coordination of the recommended service plan. *VOC* will provide any assistance in locating a referral resource covered by the EAP member's benefit plan or an appropriate community resource to meet the member's unique needs. As required, exceptions to this protocol are coordinated through the *VOC* EAP Care Manager. Refer to the EAP Affiliate Agreement for more information.

Any referrals made to non-*VOC* credentialed providers or programs, or to a community resource, is facilitated rather than made. This is an important legal distinction that has to do with limits to liability and responsibility over the actions of others that are not contractually agreed to in advance. EAP members should be made aware of this distinction as it may apply.

If you have any questions regarding the EAP member's benefits through *VOC*, please call *VOC* at the number listed in the Account Specific Reference Guide at www.valueoptions.com/provider/contractspecific/voc/clientlist.htm

Coordinating Other EAP Services

Upon *VOC* special request, and based upon the qualifications of a credentialed EAP Affiliate, other EAP services provided by the Affiliate may include:

- Participation in return-to-work conferences
- Supervisory/management training and employee orientations
- Telephone and in-person management consultations
- Crisis management services
- Topical seminars (e.g. stress management, parenting skills, communications skills, etc.)

Reimbursement

Participating EAP Affiliate Information

EAP Affiliates will be reimbursed in accordance with their contractual agreement. The following information is required from all EAP Affiliates for proper reimbursement of EAP referral services:

- Name of individual EAP Affiliate and signature
- Name, complete billing address, and Social Security Number or tax identification number of the payee

EAP Member, Employee and Payer Information

- EAP member's full name
- EAP member's gender and date of birth
- Employee's date of birth if EAP member is not employee
- Employee's full name
- Employee's Social Security Number
- EAP member's relationship to the employee
- Client name (e.g., employer name)

Service Information

- Service types used
- Dates of service
- Number of hours or sessions
- Total due according to EAP Affiliate contracted rate
- EAP Affiliates will only be reimbursed when an EAP Affiliate Billing Form is completed and submitted with a Case Activity Form (CAF)

Participating EAP Affiliate Payments

- Participating EAP Affiliates will be reimbursed by *VOC* at the contracted or negotiated rate for EAP services for each approved 60-minute session.
- Affiliates must not exceed the number of sessions authorized for a member.

- EAP Affiliates must not bill an EAP member for any expense incurred.
- Affiliates should not bill for telephone contacts with or on behalf of the EAP member.

VOC shall arrange for payment of invoices submitted by EAP Affiliates for EAP services rendered within thirty (30) working days after receipt of the invoice. This payment period may be extended if *VOC* contests all or a portion of the invoice, in which case the EAP Affiliate shall be notified in writing within thirty (30) working days after receipt of the invoice or if there is incomplete information on the billing form or Case Activity Form.

- Whenever there are specific questions or extenuating circumstances concerning an invoice, an EAP Affiliate should consult the *VOC* EAP Affiliate Agreement and then contact the *VOC* EAP Care Manager who referred the EAP member.

Billing for Missed Appointments

VOC does not reimburse participating EAP Affiliates for missed or cancelled appointments; nor may an EAP member be billed.

Timely Filing*

Participating EAP Affiliates are required to file invoices within ninety (90) days from the date the service was provided. *VOC* will not be responsible for payment of claims for covered services not received within ninety (90) days of the rendering of such services, unless the EAP Affiliate can demonstrate good cause for such delay, as determined in accordance with the *VOC* provider dispute resolution mechanism..

Payment is facilitated by the accurate completion and return of all necessary forms as described in the EAP Affiliate Agreement.

Maximum Visits Per Day

VOC EAP plans provide reimbursement for only one professional service per day.

VOC EAP Services

This description of *VOC* EAP Services is for reference only. The provision of such services may differ according to client specific EAP benefit design requirements.

Critical Incident Consultation and Debriefing (“CID”) *VOC* provides an on-site response in connection with serious workplace incidents involving acts of violence or destructive forces of nature that may impact the ability of employees to perform their jobs following such events. The CID involves a structured process of education and consultation to assist in easing the trauma and returning a personal sense of control to the affected employees.

Employee Orientation

Employees may not fully understand the connection between the EAP and their own needs for assistance. This orientation will help employees quickly understand the risks associated with personal problems which may be negatively impacting their work performance, and describe how the EAP may help. This information emphasizes employees’ self-help for previously ignored or covered-up problems that tend to

get worse over time without treatment. This program typically consists of an on-site meeting with large groups of employees lasting one (1) hour per orientation.

Supervisor/Management Training

Formal training sessions for supervisors, managers, and key leadership will clearly define respective roles and aid in facilitating referrals to the EAP to support positive change in employees with personal and job related problems.

Management Consultation

General guidance is provided on the management of employee performance problems, substance abuse identification and intervention, EAP referrals, conflict resolution, downsizing support, and assistance with design, implementation, operation, evaluation and modification of the EAP.

Topical Seminars

Seminars are typically one hour in length and may be customized to cover unique topics of concern to a company's employees. Seminars may include such topics as stress management, parenting skills, or communication skills, etc.

EAP Affiliate Provider: Frequently Asked Questions

If an EAP member needs ongoing treatment beyond their EAP benefit, am I allowed to refer to myself?

You must request prior authorization from a VOC EAP Care Manager before making any self-referral. See "Affiliate Self-Referral" for more information.

How much is the reimbursement fee?

The reimbursement fee is \$60 per one-hour client session.

To whom do I submit the billing information?

You should send your bills to the following address: *ValueOptions*, P.O. Box 1290, Latham, NY 12110.. The address to send your invoices to is also located on the authorization letter that you will receive from VOC. *Please don't forget to submit the completed Case Activity Form along with the completed billing form so that we can process your invoice.* See Section on Reimbursement for more information.

How will I know the number of visits that are covered under the client's EAP model?

The VOC EAP Care Manager will advise you of the number of visits available for the client being referred to you. This information will also be contained in the authorization letter that you will receive from VOC.

If I determine the client's needs are beyond the scope of their EAP benefit should I refer the client to their company sponsored medical or mental health/substance abuse benefit or should I refer them to VOC?

If VOC or *ValueOptions*, Inc. is the manager of the client's mental health/substance abuse (MH/SA) benefits, you should contact the VOC EAP Care Manager to coordinate a referral to a network provider. If VOC or *ValueOptions*, Inc. is not the manager of the client's MH/SA benefit, you should help link the client to their company-sponsored benefit program.

If a prior client returns for additional services after his/her case has been closed, should I call for another authorization?

If a client comes back for additional services, you should consult with the VOC EAP Care Manager to determine what can best meet the client's needs. An authorization will depend on the needs of the client and what is available under the client's EAP benefit at that time.

What should I do if I don't receive the EAP authorization letter for a client that has been referred by VOC?

If you have any questions or concerns, please feel free to contact the VOC EAP Care Manager.

Is it okay for me to excuse an employee from work (or request a shift change, or other change in the work environment)?

Any concerns of this nature should be referred to the VOC EAP Care Manager, who will consult with the client's employer as necessary. You should not have contact with the client's employer.

Should I have direct contact with an employee's supervisor?

You should not have contact with the client's employer. Please feel free to consult with the VOC EAP Care Manager regarding any concerns of this nature.

Why can't I bill using the same form I do for MH/SA service?

When you bill for EAP Services it is necessary to use the EAP Affiliate Billing Form. The purpose of using this form is so the client's EAP benefits are tracked separately from the client's MH/SA benefits. The [EAP Case Activity and Billing Form](#) is a more simplified form than the CMS 1500 form that is used for MH/SA services.

EAP Affiliates and Staff: Please offer to read the following statement to EAP participants and discuss the content with them, providing any additional assistance required to review and understand this document particularly for individuals with special needs.

EMPLOYEE ASSISTANCE PROGRAM
EAP PARTICIPANT STATEMENT OF UNDERSTANDING

To Our EAP Participants:

VOC is pleased that you have decided to use your Employee Assistance Program ("EAP"). The EAP is a voluntary service available to eligible employees and family members. There are several things we want you to know before we begin discussing your reason for contacting the EAP.

Personal problems are sometimes very difficult to talk about. That is why confidentiality is extremely important to us. We take every precaution in protecting the confidentiality of your visit with us and we hope that you will do the same. A written and electronic record (date, time, nature of meeting) of your contacts with the EAP will be maintained in a secure manner. Access to the record will not be given to anyone outside of the EAP, except as required by law or as described below. To access your file, contact VOC.

This provides an opportunity for you to discuss personal problems with us. We will help you with an assessment of your personal problems and then develop a plan of action with you. The plan of action may include a referral to an appropriate resource to help you resolve your problems. After the referral is made, we will follow up to be sure the referral is satisfactory. In the event that there is no referral, we will still develop an action plan with you.

There are limitations to confidentiality that are beyond our control:

1. If we learn about child, elder or disabled adult abuse or neglect, we are required by law to report it to the proper authorities.
2. If, in our judgment, an EAP participant presents a threat of imminent and serious bodily harm to himself or others we will disclose information in order to help prevent harm.
3. If we are required to present records to comply with a court order, it is our legal responsibility to comply.
4. If we learn about an emergency medical circumstances which require immediate medical attention.

To the extent possible, we want to ensure the counselor that you will be meeting with is a person with whom you are comfortable. For example, some people have a preference for a counselor of a particular gender, sexual orientation, ethnicity, or religion. If this is a concern, VOC would like to give you the opportunity to let us know so that we may attempt to arrange a referral to a counselor that is appropriate for you. Should you have any concerns or be dissatisfied with the EAP or your counselor, please contact VOC.

There is no cost to you for any EAP services provided by VOC. The Employee Assistance Program does not, however, cover the costs of therapy or community resources/treatment services to which you may be referred. We attempt to maintain up-to-date information on your health insurance coverage so that we can refer you to providers covered by your plan. However, it is your responsibility to verify that your insurance will cover the cost of such therapy or other treatment or resources.

I hereby acknowledge that I have read and understand this Statement of Understanding.

Signature of Participant

Date

Please Print Your Name

Signature of Personal Representative

Date

Please Print Your Name

If you are signing this form on behalf of someone other than yourself, please enclose with this request form proof of your authority to do so and attach written documentation (i.e. Guardianship Order, Custody Order, Court Order) as appropriate.

Afiliados y personal del programa EAP: Por favor ofrezcan leer las siguientes declaraciones a los participantes del programa EAP y analizar el contenido con ellos; además, proporcionen cualquier asistencia adicional necesaria para revisar y entender este documento, especialmente a las personas con necesidades especiales.

PROGRAMA DE AYUDA PARA EMPLEADOS
DECLARACIÓN DE ENTENDIMIENTO
DE LOS PARTICIPANTES DEL PROGRAMA EAP
REFERIDO FORMAL

A los participantes de nuestro programa EAP:

VOC está complacido de saber que usted ha decidido usar nuestro Programa de Ayuda para Empleados ("EAP" por sus siglas en inglés). El programa EAP es un servicio confidencial y voluntario para los empleados elegibles y sus familiares directos. Usted debe saber algunas cosas antes de comenzar a evaluar las razones por las cuales se comunicó con el programa EAP.

Algunas veces es difícil hablar sobre problemas personales. Por esta razón, la confidencialidad es sumamente importante para nosotros. Observaremos todas las precauciones necesarias para proteger la confidencialidad de su visita con nosotros y esperamos que usted haga lo mismo. Se mantendrá, de una manera segura y confidencial, un registro escrito y electrónico (fecha, hora, razón de la reunión) de sus contactos con el programa EAP. Fuera del programa EAP, ninguna persona tendrá acceso a los registros, excepto en la medida que la ley lo requiera, tal como se describe a continuación. Para acceder a su archivo, comuníquese con VOC.

Le proporcionaremos una oportunidad segura y sin riesgo para usted de tratar problemas personales con nosotros. Le ayudaremos mediante una evaluación de sus problemas personales y luego desarrollaremos un plan de acción con usted. El plan de acción puede incluir recomendar contacto con un proveedor de servicios apropiado que le ayude a resolver sus problemas. Después de hacer esta recomendación, realizaremos un seguimiento para asegurarnos que el servicio fue satisfactorio. En el caso que no sea necesario recomendar a otro proveedor de servicios, desarrollaremos siempre un plan de acción con usted.

A continuación, las limitaciones a la reserva confidencial:

1. Si obtenemos información acerca de maltrato de niños o de adultos con discapacidades, es nuestra obligación por ley informarlo a las autoridades correspondientes.
2. Si, en nuestra opinión, el participante del programa EAP representa una amenaza de lesión corporal inminente hacia sí mismo u otros, divulgaremos esta información con el objeto de ayudar a proteger contra daño a una persona.
3. Si recibimos orden del tribunal de presentar registros, será nuestra responsabilidad acatarla.
4. Si obtenemos información sobre circunstancias médicas que requieran intervención médica de inmediato.
5. Si usted fue formalmente referido al EAP por su supervisor, se le proveerá a el o ella, la siguiente información no clínica:
 - a. Si usted está o no está comunicándose con el EAP.
 - b. Si se le recomendó o no algún tratamiento; y
 - c. Si usted está participando y cumpliendo con su plan de tratamiento.

Nota: No se le proveerá a su supervisor información clínica sobre su problema específico.

Nota: Su patrono puede tomar medidas disciplinarias basadas en la información provista o basada en su denegación de proporcionar información.

En la medida que sea posible, deseamos asegurarnos que el consejero con quien tendrá sus sesiones sea una persona con quien usted se sienta cómodo. Por ejemplo, algunas personas prefieren un consejero de género, orientación sexual, grupo étnico o religión específicos. Si éste es su caso, *Value*

Options of California desea brindarle la oportunidad de que nos lo informe con el fin de que podamos recomendar un consejero apropiado para usted. Si tuviera alguna preocupación, o si no está satisfecho con el programa EAP o con su consejero, por favor comuníquese con *Value Options of California*.

Cualquier servicio del programa EAP proporcionado por *VOC* es gratuito para usted. Sin embargo, el Programa de Ayuda para Empleados no cubre los costos de terapias, informes, recursos o servicios de tratamiento de la comunidad que podrían recomendarse. Trataremos de mantener información actualizada de su cobertura de seguro médico con el fin de recomendarle proveedores cubiertos por su plan. Sin embargo, será su responsabilidad verificar si su seguro cubre el costo de dichas terapias u otros tratamientos o recursos.

Por el presente declaro que he leído y entiendo esta Declaración de Entendimiento

Firma del participante: _____

Fecha _____

Nombre Impreso: _____

Firma del Representante de Personal

Fecha _____

Nombre Impreso

EAP Affiliates and Staff: Please offer to read the following statement to EAP participants and discuss the content with them, providing any additional assistance required to review and understand this document particularly for individuals with special needs.

**Employee Assistance Program
Formal REFERRAL
EAP PARTICIPANT STATEMENT OF UNDERSTANDING**

To Our EAP Participants:

VOC is pleased that you have decided to use your Employee Assistance Program ("EAP"). The EAP is a voluntary service available to eligible employees and family members. There are several things we want you to know before we begin discussing your reason for contacting the EAP.

Personal problems are sometimes very difficult to talk about. That is why confidentiality is extremely important to us. We take every precaution in protecting the confidentiality of your visit with us and we hope that you will do the same. A written and electronic record (date, time, nature of meeting) of your contacts with the EAP will be maintained in a secure manner. Access to the record will not be given to anyone outside of the EAP, except as required by law or as described below. To access your file, contact VOC.

This provides an opportunity for you to discuss personal problems with us. We will help you with an assessment of your personal problems and then develop a plan of action with you. The plan of action may include a referral to an appropriate resource to help you resolve your problems. After the referral is made, we will follow up to be sure the referral is satisfactory. In the event that there is no referral, we will still develop an action plan with you.

Following are limitations to confidentiality:

1. If we learn about child, elder or disabled adult abuse or neglect, we are required by law to report it to the proper authorities.
2. If, in our judgment, an EAP participant presents a threat of imminent and serious bodily harm to himself or others, we will disclose information in order to help prevent harm.
5. If we are required to present records to comply with a court order, it is our legal responsibility to comply.
6. If we learn of an emergency medical circumstance which requires immediate medical intervention.,
7. If you were formally referred to EAP by your supervisor, he or she will be provided with the following non-clinical information:
 - a. Whether or not you have followed through in contacting the EAP;
 - b. Whether or not treatment has been recommended; and
 - c. Whether or not you are participating in and complying with your treatment plan.

Your supervisor will not be given clinical information about the specifics of your problems.

Note: Your employer may take disciplinary action based on the information provided or based on your refusal to release information.

To the extent possible, we want to ensure the counselor that you will be meeting with is a person with whom you are comfortable. For example, some people have a preference for a counselor of a particular gender, sexual orientation, ethnicity, or religion. If this is a concern, VOC would like to give you the opportunity to let us know so that we may attempt to arrange a referral to a counselor that is appropriate for you. Should you have any concerns or be dissatisfied with the EAP or your counselor, please contact VOC.

There is no cost to you for any EAP services provided by VOC. The Employee Assistance Program does not, however, cover the costs of therapy or community resources/treatment services to which you may be

referred. We attempt to maintain up-to-date information on your health insurance coverage so that we can refer you to providers covered by your plan. However, it is your responsibility to verify that your insurance will cover the cost of such therapy or other treatment or resources.

I hereby acknowledge that I have read and understand this Statement of Understanding.

Signature of Participant

Date

Please Print Your Name

Signature of Personal Representative

Date

Please Print Your Name

Afiliados y personal del programa EAP: Por favor ofrezcan leer las siguientes declaraciones a los participantes del programa EAP y analizar el contenido con ellos; además, proporcionen cualquier asistencia adicional necesaria para revisar y entender este documento, especialmente a las personas con necesidades especiales.

**PROGRAMA DE AYUDA PARA EMPLEADOS
DECLARACIÓN DE ENTENDIMIENTO
DE LOS PARTICIPANTES DEL PROGRAMA EAP**

A los participantes de nuestro Programa de Ayuda al Empleado:

VOC está complacido de saber que usted ha decidido usar nuestro Programa de Ayuda para Empleados ("EAP" por sus siglas en inglés) El programa EAP es un servicio confidencial y voluntario para los empleados elegibles y sus familiares directos. Usted debe saber algunas cosas antes de comenzar a evaluar las razones por las cuales se comunicó con el programa EAP.

Algunas veces es difícil hablar sobre problemas personales. Por esta razón, la confidencialidad es sumamente importante para nosotros. Observaremos todas las precauciones necesarias para proteger la confidencialidad de su visita con nosotros y esperamos que usted haga lo mismo. Se mantendrá, de una manera segura y confidencial, un registro escrito y electrónico (fecha, hora, razón de la reunión) de sus contactos con el programa EAP. Fuera del programa EAP, ninguna persona tendrá acceso a los registros, excepto en la medida que la ley lo requiera, tal como se describe a continuación. Para acceder a su expediente, comuníquese con VOC.

Esto provee una oportunidad para discutir sus problemas personales con nosotros. Le ayudaremos mediante una evaluación de sus problemas personales y luego desarrollaremos un plan de acción con usted. El plan de acción puede incluir referido con un proveedor de servicios apropiado que le ayude a resolver sus problemas. Después de hacer esta recomendación, realizaremos un seguimiento para asegurarnos que el servicio es satisfactorio. En el caso que no sea necesario recomendar a otro proveedor de servicios, desarrollaremos un plan de acción con usted.

Existen limitaciones a la reserva confidencial, que están fuera de nuestro control:

1. Si obtenemos información acerca de maltrato de niños o de adultos con discapacidades, es nuestra obligación por ley informarlo a las autoridades correspondientes.
2. Si, en nuestra opinión, el participante del programa EAP representa una amenaza de lesión corporal inminente hacia sí mismo, otros, o a la propiedad de la compañía; divulgaremos esta información con el objeto de ayudar a prevenir los daños.
3. Si recibimos orden del tribunal de presentar su expediente, será nuestra responsabilidad acatarla.
4. Si nos enteramos sobre cualquier circunstancia médica que requiera atención medica de inmediato.

En la medida que sea posible, deseamos asegurarnos que el consejero con quien tendrá sus sesiones sea una persona con quien usted se sienta cómodo. Por ejemplo, algunas personas prefieren un consejero de género, orientación sexual, grupo étnico o religión específicos. Si éste es su caso, VOC desea brindarle la oportunidad de que nos lo informe con el fin de que podamos recomendar un consejero apropiado para usted. Si tuviera alguna preocupación, o si no está satisfecho con el programa EAP o con su consejero, por favor comuníquese con VOC.

Cualquier servicio del programa EAP proporcionado por VOC es gratuito para usted. Sin embargo, el Programa de Ayuda para Empleados no cubre los costos de terapias, ni recursos o servicios de tratamiento de la comunidad que podrían recomendarse. Trataremos de mantener información actualizada de su cubierta de seguro médico con el fin de recomendarle proveedores incluidos en su plan. Sin embargo, será su responsabilidad verificar si su seguro cubre el costo de dichas terapias u otros tratamientos o recursos.

Por el presente declaro que he leído y entiendo esta Declaración de entendimiento

Firma del participante: _____

Fecha _____

Nombre Impreso: _____

Firma del Representante Personal

Fecha _____

Nombre Impreso

Si usted esta firmando esta forma a favor de alguien que no es usted, por favor incluya prueba de su autorización para hacerlo e incluya documentación escrita (Orden de Guardián, de Custodio o de la Corte) según sea el caso
