

PROVIDER MANUAL For EAP Services



EAP Provider Relations ProviderRelations@efr.org www.efr.org f 🎔 YouTube in 8+

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History

Employee & Family Resources® (EFR) was established in Des Moines, Iowa in 1964 as a private, not-forprofit health service organization providing educational services and independent assessment and referral services. EFR's Employee Assistance Program (EAP) was initiated in 1975. The EFR provider network was established in 1986 to provide services to employees located throughout the United States. We partner with clinicians around the country to provide EAP services including counseling and crisis response. Today, EFR has providers available in locations throughout North America and we are continually expanding our coverage to provide services in communities big and small.

Provider Standards

Requirements for continued participation in EFR's provider network:

- Possession of all applicable state licensure and/or certification requirements
- Professional liability insurance (minimum of \$1,000,000/\$3,000,000)
- Annual participation in professional development activities which are to include addictions, crisis intervention, and professional ethics.
- A respected role in the community with a record free of license refusal or suspension, malpractice, or other judgments of professional misconduct.
- Provision of services in a professional environment free of harassment, including sexual harassment, with respect to colleagues and clientele (a copy of EFR's sexual harassment policy is available upon request).
- Adherence to all applicable state and federal confidentiality guidelines.
- Compliance with federal and state law requirements regarding mandatory reporting of child and dependent adult abuse.
- Adherence to a non-discriminatory practice in which clients are not denied service based on race, creed, color, religion, political affiliation, national origin, gender, age, physical or mental disability, sexual orientation, or positive test for AIDS-related virus.
- Knowledge of community resources.
- Knowledge of substance abuse assessment skills sufficient to result in recommendations for any treatment services by a qualified provider.

Definition of an Employee Assistance Program (EAP)

Employee Assistance Programs (EAPs) are employment-related services provided mainly through contract or arrangement with an organization designed to identify and assist employees with problems that interfere with work productivity or cause difficulties that impact their home or work life. EAP services typically include assessment and referral, short term problem solving, referral resource identification, education and work/life services. The services are voluntary, confidential and at no cost to the employee. While EAP services seek to help employees and their families to cope with and resolve their problems, the distinction of EAP programs is their workplace focus.



Core EAP Technologies

EAP services focus on specific core functions when assisting employees to enhance their workplace effectiveness through prevention, identification and resolution of personal and productivity issues. The EAP is a workplace-sponsored benefit designed to assist with addressing productivity issues and/or resolve personal concerns that may affect job performance. At all times, there is a need to remain neutral and refer employee clients back to the employer when they have certain issues that relate to the workplace. These issues include FMLA, worker's compensation claims, company policy concerns, issues with management. Both employees and family members are typically eligible for this benefit. EAP core technologies include, but are not limited to, the following:

- Confidential and timely problem identification/assessment services for employee clients with personal concerns that may affect job performance. The assessment would include family, marital, health, mental health, substance abuse/use, financial, legal, dependent care and workplace concerns.
- Use of constructive confrontation, motivation and short-term intervention with clients to address problems impacting their work life while remaining a neutral party where workplace issues are concerned.
- Referral of clients based on a completed assessment and recognition of the importance of coordinating with insurance providers or providing affordable community resource options when referring beyond EAP services. Referrals may include support groups, community agencies, a behavioral health professional for counseling beyond the EAP. For clients in need of assistance with legal or financial concerns, please refer back to EFR as this is also available as an EAP program benefit.
- Awareness of employer organizational structures and the role of human resources, union stewards, benefits and medical personnel along with an understanding that the client is a customer of a larger organization. The client experience with EAP services may impact the business relationship between EFR and its corporate customers.
- Recognition of the effects of EAP services on the work organization and individual client job performance and work life success.

For more information about the EAP industry go to <u>www.eapassn.org</u> to visit the EAPA website.



Examples of EAP Versus Referral Services

EAP appropriate examples:

- Work/occupational issues
- Career planning/changes
- Financial/legal problems & resultant stress
- Marital/family issues
- Situational relationship issues
- Uncomplicated grief/loss
- Concern about another's substance abuse
- Communication and interpersonal skills
- Adjustment reactions
- Stress management
- Parenting education/resource identification
- Balancing work and family
- Uncomplicated anger management
- Alcohol/Drug education

Other considerations:

- Strong support system exists
- Internal locus of control
- High motivation for change
- Situational, attainable goals
- Medically stable
- Education component
- Prevention versus treatment
- Time limited focus

Referral appropriate examples:

- Major complex psychiatric conditions
- · Individuals with active psychotic symptoms
- Psychological testing
- Medical evaluation
- Chronic, relapsing illnesses
- Chemical Dependency needing stabilization and/or treatment
- Hospitalization is required
- Personality Disorders
- Severe anger management problem
- Mental health issues stemming from childhood factors
- Chronic, violent relationship issues
- Complicated family problems
- Current domestic abuse

Other considerations:

- Little or no support system
- External locus of control
- Low motivation
- Limited insight ability
- Unable to identify goals
- Needs sustained treatment
- Needs specialized treatment
- Management referral
- Employer/employee disputes
- Legal or court ordered issues



EAP Services

Assessment & Referral Services

Companies establish a contract with EFR's EAP to provide a cost-free and easily accessible resource for employees and their families to obtain assistance with issues that may be affecting their well-being and, often, their work performance. The purpose of EAP services is to support employees to identify and resolve problems as timely and efficient as possible. The role of the EAP clinician is to assist the client toward a better understanding of their problem(s) and subsequently, assist them with locating resources to help them reach problem resolution. The number of EAP hours available to the client is established through the employer's contract with EFR. The EAP assessment/referral service is not a mental health or substance abuse treatment benefit but is intended as a bridge to the resources that can assist in final problem resolution.

On-Site Crisis Response Services

EFR is often called upon to provide Crisis Response Services. EFR has trained professional staff and established procedures and protocol for such services but will often need provider assistance in the provision of direct, in-person services. EFR staff will finalize arrangements and reimbursement for Crisis Response services with the provider as the need arises. Provider eligibility to provide Crisis Response services is established at the time of provider credentialing.

On-Site Company Training Services

EFR provides on-site trainings or presentations to companies on subjects such as surviving downsizing, stress management, workplace conflict, drug free workplace, etc. EFR will sometimes seek the assistance of network providers to conduct such training. EFR staff will finalize arrangements and reimbursement for these services with the provider as the need arises. Provider eligibility to deliver training services is established at the time of credentialing.

Legal, Financial, ID Theft, Eldercare & Childcare Services

The EAP offers many work-life services to employees, all of which are provided by EFR's corporate office. If a client presents with issues related to the above categories, the provider should refer the client back to EFR staff at (800) 327-4692 for assistance.

Services Not Covered By EAP

- Fitness for Duty evaluations
- Evaluation and/or report for a court or a government agency, worker's compensation proceeding, or any other legal matter
- Group counseling
- Biofeedback or hypnotherapy
- Medication management

If a client has questions that you cannot answer about their EAP service, please redirect to the EFR counseling phone center at 800-327-4692 or 515-244-6090.



Provider Procedures

Authorization of EAP Services

- EFR receives a request for service from the eligible client and conducts a telephone intake.
- EFR phones the provider to relay client information and the number of EAP hours authorized. The phone authorization will also be supplemented with a written authorization sent by fax, mail, or email.
- The client phones the provider to schedule an appointment or, in some cases, EFR will request an appointment time on behalf of the client.
- The client must be scheduled with a clinician that has been credentialed as a provider for EFR.
- If the client fails to show for the first appointment, the provider should notify EFR so that EFR may establish the client's intent to access services from the provider to minimize future no-shows.
- Services provided in California are required to be compliant with Knox-Keene regulations, providing assessment and referral services only, not to exceed three (3) hours within a six month period to Covered Persons at no charge to the Covered Persons.

The EAP Assessment

- At the first EAP session and after review by the provider and client(s), the client(s) completes the EAP Case Data form and signs the Statement of Understanding section.
 This process includes reminding the client(s) of the number of authorized hours to ensure that they understand the parameters of their EAP benefit. Each client receiving service must sign this form, including minor-aged children. This form should be returned to EFR following the first appointment.
- The provider assesses the client's problem(s) and determines appropriate direction for problem resolution. This is done within the authorized EAP hours.
- The assessment is to include a thorough biopsychosocial evaluation, including an assessment of trauma and risk, work issues, and drug/alcohol use.
- The provider will explain the benefits, alternatives, and consequences of planned services with the client.
- Upon completion of the authorized hours, the EAP benefit is ended.
- Often, the identified issues are adequately addressed through the short-term intervention of the EAP hours. When it is not, the issue is deemed beyond the scope of EAP and a referral for further services may be indicated. Self-referral is acceptable as an option included in a continuum of resources offered the client.
- In the event of a referral to another provider, the EAP provider follows up with the client within 30 days to ensure the employee is receiving the needed services.
- All required documents applicable to the case are returned to EFR within 90 days of each date of service to ensure full reimbursement.



Provider Procedures (continued)

Referring the Client for Additional Services

- If further services are desired by the client, the provider identifies resources, reviews these with the client and assists with the referral as needed. In the case of management referrals, the provider will assist in obtaining relevant signed authorizations from the client for any recommended referral services.
- Discussion of the referral options and assistance to transition to ongoing resources should occur within the authorized EAP hours.
- When recommending a referral resource, the provider must take into consideration the client's financial resources and assist them with locating affordable services.
- If the client wishes to use their health insurance, the provider will make a good faith effort to clarify applicable insurance coverage. However, it is the final responsibility of the client to confirm coverage with their insurance provider prior to following through with the referral.
- The cost of services performed beyond the authorized EAP hours is the responsibility of the client. Specific information regarding costs of referral services should be shared with the client prior to finalization of the referral.
- Examples of referral types include consumer credit organizations, mental health and family counselors, career counselors, physicians, and substance abuse treatment facilities.
- Complete a follow-up call with the client within 30 days to ensure access to the referral services.

Management Referral Clients

The majority of clients access their EAP services on a self-referral basis. The exception is the management referral in which the employer refers the client to the EAP when the employer is considering or has taken job action based on quality of job performance or other job-related concerns. The goal of the management referral is to assist the client with resolving any issues that may be impacting his/her success on the job. In such cases, EFR will give the provider instructions on how to proceed with the assessment and any necessary case management. It is essential to remain neutral when assisting an employee in the course of providing services when that employee has been referred for work related problems. The focus needs to be on assisting the employee to change or improve behaviors or resolve personal difficulties in order to be successful at work and resolve the work problems that led to the referral. EFR will provide all communication to the employer when needed. The provider must NOT communicate with the employer directly.

A form will be sent to the provider with a synopsis of pertinent information regarding the reasons for the employee's referral to the EAP and the employer's expectations of the employee. An EFR EAP Professional will be assigned to each individual case and will case manage the process and provide support to the provider counselor via case consultation.

NOTE: There may be circumstances outside of a management referral case when the provider or EFR staff intends to communicate verbally or in writing regarding the client with an individual external to the provider organization or EFR. Releases are NOT needed for communication between EFR and the provider. EFR staff may prepare this authorization form for the provider, when appropriate.

High Risk Clients

Whether a self or management referral, EFR should be contacted when an EAP case becomes a high-risk case. Examples include threats of violence to self and others, and severe mental illness affecting job performance. This consultation enables EFR to assist with any case management that may need to occur, including conversations with the employer. As with management referrals, communication with employers is to take place only between EFR and the company representative. **The provider should make no direct contact with an employer unless there is need for an immediate duty to warn.**



Provider Reimbursement

Clients must be referred and have hours authorized by EFR. All individuals requesting EAP services from the provider must be directed to contact EFR for verification of eligibility prior to delivery of service.

Clients must attend the session. No-shows and late cancellations will not be reimbursed. EFR does acknowledge the disruption that a failed appointment causes the provider practice; thus, may pre-authorize payment for a failed appointment when having requested the provider to schedule a client who has demonstrated a pattern of cancellations or no-shows.

Payment will not be made for indirect activities such as paperwork and phone calls. However, when the provider delivers an undue amount of indirect service due to the type of client referral (e.g. management referrals), EFR may pre-authorize reimbursement for such activities.

Payment will be at the contracted rate. The provider has accepted this rate as full reimbursement for all EAP services and will not bill the client or any third party payer for additional costs above this rate.

Payment will be made when documentation is received within 90 days of each service date. EFR will enforce this expectation through rate reduction or full denial of payment for late documentation as the timely receipt of client information is necessary for EFR to provide crucial reporting information to its contracted companies. EFR's fee reduction schedule for late submission of provider documents is as follows:

Paperwork received after each date of service	Fee Reduction	Net Fee
Up to 90 days	none	100%
91-180 days	50%	50%
Over 180 days	100%	0%

Reimbursement

Reimbursement will be provided upon receipt of all completed required EAP provider documents. EFR will not accept any incomplete forms and reimbursement may be delayed. These documents are due within 90 days of each date of service to guarantee full reimbursement. Each session can be billed individually. Late submissions may result in a reduction in reimbursement. The case should be closed if the client has not used his or her authorized EAP hours within approximately a 90-day time period and have no appointments scheduled. The forms required for reimbursement are the EAP Case Data, EAP Case Summary, EAP Case Billing/Closing, and the EAP Assessment Worksheet (may substitute with your own if it covers all areas of our assessment worksheet). See next section for details on provider documents.



Guide to EAP Provider Forms

EAP Provider Instructions

The role of the EAP clinician is to assist the client toward a better understanding of their problem(s) and to assist them with locating resources to help them reach problem resolution. The EAP benefit is not a mental health or substance abuse treatment benefit but is intended as a bridge to the resources that can assist in final problem resolution.

EAP Provider Documents

Two forms are required for reimbursement:

- EAP Assessment Worksheet or your comparable Assessment form as long as it covers what ours does.
- EAP Case Billing and Closing

EAP Assessment Worksheet

The clinical assessment worksheet used in your practice may be used as long as it covers what ours does. An assessment worksheet is to be included for reimbursement.

EAP Case Billing and Closing

This form serves as an invoice when accompanied by the EAP Assessment Worksheet. The completed EAP forms must be received within 90 days of **each** date of service to guarantee full reimbursement.

Reimbursement Guidelines: It is vital to EFR's business that our companies receive timely reports on the use of the EAP by their employees. A fee reduction system is in place as an incentive for paperwork to be submitted in a timely manner.

Grievance Form

EFR recognizes the client's right to make formal complaints or file a grievance regarding employee assistance services. Although EFR encourages clients to resolve concerns directly with their assessment counselor or other EFR staff, the client may submit a written complaint to EFR. The EFR Grievance Form provided on the next page of this manual should be made available to all clients who wish to submit a written complaint.



Employee Assistance Program Grievance Form

Employee & Family Resources recognizes the client's right to provide feedback or file an informal grievance regarding EFR services. Clients are encouraged to identify concerns as they arise and speak directly with their counselor or other EFR staff about the concerns whenever possible. There are occasions when a client does not feel their concerns are resolved through these communication channels and filing a formal grievance is desired.

Clients are encouraged to call or write the Clinical Director or Provider Services with their specific concerns. They can be reached at **(515) 244-6090** or **(800) 327-4692** and at 505 5th Avenue, Suite 600, Des Moines, IA 50309.

Within two (2) working days of receipt of a written grievance form, the EFR Manager (or other designated staff) will acknowledge receipt of the information and will collect additional information from the client and/or EFR staff or contracted provider. Upon completion of an investigation of the situation, the EFR Manager (or other designated staff) will notify EFR Clinical Director of findings and recommendations. The Clinical Director will determine the action to be taken.

Within fourteen (14) days of receipt of a written grievance form, EFR staff will notify the client of the findings and/or disposition. Notification will occur as the client requested, either by telephone and/or in writing.

Complaint

Specific complaint including information as appropriate regarding the nature of the issue, EFR staff involved, and date/location of services or issues: _____

Desired resolution:				
Name:Date:				
Name:Date:	Desired resolution:			
Address:	Name:	Date:		
Address:				
	Address:			
Phone:	Phone:			
How would you like EFR to contact you:TelephoneMailBoth	How would you like EFR to contact you:	_Telephone	Mail	Both



How to send EFR confidential paperwork

Option 1:	Upload confidential case paperwork via our secure web shttp://www.efr.org/contact-provider-relations/
Option 2:	Mail confidential case paperwork to: Employee & Family Resources Provider Network 505 5th Avenue, Suite 600 Des Moines, IA 50309
Option 3:	Fax confidential case paperwork to: Fax: (515) 284-5201

Contact us

site at:

To email us your inquiries (no confidential client information): ProviderRelations2@efr.org

To call us with credentialing, reimbursement paperwork questions, or payment inquiries: 866-834-3580 To contact one of our counselors, please call the phone center: 800-327-4692

