

## Frequently Asked Questions about Referrals From CONCERN

### **I received a referral letter but never heard from the client. The office left the client's number when I was told about the referral. Should I call the client?**

Clients are given your number and either transferred to your office or told to call you. Our office leaves a message with the phone number because clients can forget to leave it, transpose a number, or their message may be hard to understand. You do not need to call the client unless you are asked to do so.

### **What do I do if someone is referred to me but I cannot see them?**

When a client calls you attempt to schedule an appointment. If you are unable to agree on a time, ask the caller to call us for another referral. If you are not able to accept a referral because your schedule is full or because you are going on vacation, please leave a message at 888-805-0090 (option 2) or 650-988-7432 on the provider line; let us know you are not available for referrals and when you will be available again. Be as specific as possible with the dates you will be unavailable.

### **I saw the client before I received the forms. What should I do?**

Sometimes counselors are able to see a client before the referral letter and forms arrive. (If you would like to be faxed the referral packet, please let us know.) Complete the forms when they are received. You can also download forms at our web-site [www.concern-eap.com](http://www.concern-eap.com). Contact the office if you are unsure how many visits the client is allowed.

### **I saw the client before I had the forms and he did not return so I cannot complete the Client Data form. What should I do?**

Complete the form with as much information as you have and submit it with the other forms with a note explaining the client was not available to complete the form.

### **Where do I send the Opening and Closing paperwork?**

Our address is 1503 Grant Road, Suite 120; Mountain View, CA 94040. Our fax number is 650-966-9291. Our address and fax number appear on the bottom of the opening and closing paperwork.

### **Can I bill you monthly?**

Do not send monthly billings. Some counselors have billing services that submit monthly billings. Inform your service not to send a HCFA billing for Concern clients. We pay when we receive the opening paperwork and (after the first 1 – 2 visits) and when we receive the complete closing paperwork.

### **Why do I sometimes get a form letter saying some of the forms were missing? What forms are necessary?**

Concern frequently receives incomplete billing paperwork for reimbursement. At the beginning of treatment, Concern requires the two page Client Data form (completed by the client) and the Problem Opening form (completed by the provider) including the

second page if the client consumes any alcohol or drugs or if the client is in a high risk situation as described on the form. At the end of the visits we require the Problem Closing form and the Closing Addendum form (if applicable). Please submit the Opening materials after the first or second session and the Closing materials at the end of the sessions. The Statement of Understanding should be signed by the client and retained in your chart. A Client Satisfaction Survey should be given to each client you see. See the chart below:

<b>Client Data Sheet 2 pages</b>	Client completes both pages at first visit	Fax to Concern after Intake (one or two visits)
<b>Statement of Understanding</b>	Client signs page.	Client and Provider retain copies
<b>Problem Opening Form (1)</b>	Provider completes after one or two visits.	Fax to Concern after Intake (one or two visits)
<b>Problem Opening Form (2)</b>	Provider completes top for any client with any substance use and lower half for any client in situations of risk. (see list on form)	Fax to Concern after Intake (one or two visits)
<b>Problem Closing Form</b>	Provider completes after last visit and follow-up on any referrals not confirmed during visits.	Fax to Concern after follow-up on referrals is completed
<b>Problem Closing Addendum - 2 pages</b>	Provider completes for cases that include Substance Use problems, Supervisor and Mandatory referrals, and situations of high risk.	Fax to Concern after follow-up on referrals is completed

### **How long will I have to wait to be paid?**

Concern generates payments twice a month. This means paperwork received immediately after a payment has been generated will have to wait -- at most -- three weeks to be paid. Providers may have to wait up to another week to receive the check through the mail. Incomplete paperwork delays payment. Complete paperwork results in providers receiving payment within 4 weeks, usually less.

### **I don't understand what a Supervisor referral is?**

Unique to an Employee Assistance Program is the referral of an employee by their manager or the HR department. Typically this is a person whose job may be in jeopardy and the manager wants to offer the EAP to help the employee improve their performance. Participation is voluntary but it is in the employee's interest to use whatever is available to improve their performance. If the referral is for a performance problem, compliance with the referral will not be sufficient to satisfy the employer because performance improvement is the goal. For this reason the focus of treatment should be on problems affecting job performance and the benefit is expanded to 10 visits.

**When am I supposed to consult with someone at Concern?**

Concern requires consultation with a Provider Supervisor when the referral involves imminent risk or is a Supervisor or Mandatory referral. Concern requires additional clinical information on the second page of the Problem Opening and Problem Closing to assure a thorough assessment and treatment plan in instances of alcohol or drug use, or a high risk situation.

**Do the client's benefits renew by the calendar year?**

No, the benefit renews twelve months from the date of the referral.

**Why are some clients able to get a second referral to see me and others aren't?**

Clients can contact us and be referred before their benefit renews when they have a new problem or are in crisis. However because the EAP is meant to provide brief, solution-focused counseling, clients needing ongoing sessions are best served by receiving counseling through their health insurance's behavioral health benefit. Your assessment and treatment plan should include whether the client's problem is appropriate for brief therapy and what referrals will be made at the end of the EAP sponsored visits.

**Can the client get more visits if I call in?**

Counselors in a busy practice are used to contacting managed care organizations and requesting additional visits. Concern is not a managed care organization. The number of visits is determined by the contract with the employer.

**Why do I sometimes get a call to complete a consultation or missing form even though the case is closed and I have been paid?** Periodically records are audited for quality assurance and incomplete records are required to be corrected.