

Employee Assistance Program Provider Manual

**New Directions Behavioral Health®
Employee Assistance Program
P.O. Box 6729
Leawood, KS 66206-0729
1-800-624-5544
www.ndbh.com**

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Preface

New Directions Behavioral Health takes pride in the collaborative relationships developed with Network Providers. Our Clients and your patients/Clients gain as a result of this collaboration. New Directions encourages Providers to give feedback about processes, policies, and programs.

Please consider this Employee Assistance Program Provider Manual (Manual) a general guide to programs, policies and processes. The Manual undergoes regular review and revision for accuracy, information referenced in this Manual may change without prior notice. The current version of the Manual is available on the New Directions website at www.ndbh.com.

Providers are encouraged to contact Network Operations (Provider Relations) for explanation or clarification by email EAP_PR@ndbh.com or call 800-624-5544 and press 3 for Provider assistance.

New Directions expects Providers to comply with all applicable provisions of The Americans with Disabilities Act (ADA).

New Directions expects all Providers to provide members seeking EAP and counseling services an experience and services that are free from discrimination regardless of race, gender, religion, culture, disability, veteran status, or sexual orientation.

About New Directions

New Directions has over 20 years of experience helping people live healthier balanced lives. New Directions provides integrated managed behavioral health services, employee and student assistance programs, organizational consulting, and health coaching to 16 million members within 2500 clients in all 50 states and internationally. Owned by seven Blue Cross and Blue Shield companies, New Directions employs 600 + professionals. New Directions is headquartered in Kansas City and has site offices in Jacksonville, Birmingham, Topeka, and Saint Louis, as well as remote staff in offices nationwide. In January 2018, E4 was acquired by New Directions Behavioral Health, thus providing more resources, increased provider network, technology innovations, and additional member tools - all to expand E4's and New Directions' EAP/Work-Life and managed care services.

Website

New Directions provides detailed and easy to use information about many programs and services at www.ndbh.com. Updates occur frequently to provide current information about behavioral health care and services.

The Website includes the following:

A description of our Quality Improvement activities, results of Member Satisfaction Surveys, reports of access and appointment availability, and results and information about our Case Management Programs are reported in the Health Plan Member Section. These materials are also available in print upon request.

Privacy Policy and Privacy Practices

Please refer to the detailed Privacy Policy and Privacy Practices explanation on the Website. These explain how personal information data and protected health information are collected and may be used and disclosed to third parties. For example, New Directions will only disclose to third parties personal information in aggregate form or if it is publicly available. Security measures have been implemented to prevent the unauthorized release or access to personal information. **The confidentiality of any communication transmitted to/from NEW DIRECTIONS via the Website or e-mail cannot be guaranteed.**

When a visitor performs a search on www.ndbh.com, New Directions may record information identifying the visitor or linking the visitor to the search performed. New Directions may also record limited information for every search request and use that information only to solve technical problems with the service and to calculate overall usage statistics.

CHANGES TO THIS NOTICE

New Directions may change its privacy practices and this Notice. The Notice posted on the Website for New Directions will always be the most current Notice (www.ndbh.com). If there are any significant changes in the Notice, you will be notified of them.

COMPLAINTS

If you believe that New Directions may have violated any of your privacy rights, you may call, write or email a letter of complaint to the New Directions Privacy Officer at the address below or the U.S. Department of Health and Human Services for Civil Rights (www.hhs.gov/ocr/hipaa/).

New Directions Privacy Officer
P.O. Box 6729
Leawood, KS 66206-0729
816-237-2300 (phone)
816-236-2359 (fax)
compliance@ndbh.com

YOU WILL NOT BE RETALIATED AGAINST OR PENALIZED FOR FILING A COMPLAINT.

Fraud and Abuse

New Directions Policy

New Directions is committed to preventing, identifying, investigating and reporting fraud and abuse. The Compliance Program provides education on what types of activities constitute fraud and abuse. New Directions regularly monitors and audits claims, and reports cases of fraud and/or abuse to the appropriate party, authority or governmental agency. New Directions expects its Providers to comply with all applicable state and federal laws pertaining to fraud and abuse.

Definitions

“Fraud” means an intentional deception or misrepresentation made by a person/entity with the knowledge that the deception could result in some unauthorized benefit to him/herself, or some other person/entity. It includes any act that constitutes fraud under applicable federal and state law.

“Waste” means the unintentional, thoughtless or careless expenditures, consumption, mismanagement, use or squandering of resources. Waste also includes incurring unnecessary costs as a result of inefficient or ineffective practices, systems, or controls.

“Abuse” means practices that are inconsistent with sound fiscal, business or medical practices and result in an unnecessary cost, in reimbursement for services not medically necessary, or that fail to meet professionally recognized standards for health care. It also includes beneficiary practices that result in unnecessary costs.

Examples of fraud and abuse include:

- Billing for services or procedures that have not been provided
- Submitting false information about services performed
- Making a false statement or misrepresenting a material fact in any application for any benefit or payment
- Presenting a claim for services when the individual who furnished the service was not appropriately licensed
- Failing to return an overpayment within 60 days after the later of either the date on which the overpayment was identified or the date any corresponding cost report was due

Audits

New Directions performs random audits of Provider claims and medical records as part of our standard provider management processes. Other entities may also conduct audits. No specific intent to defraud is required to find that a violation of a law occurred.

New Directions expects its providers will fully cooperate and participate with all audit requests. This includes, but is not limited to, allowing New Directions access to member treatment records and progress notes, and permitting New Directions to conduct on-site audits or desk reviews.

Compliance Program

The creation of a compliance program is encouraged to proactively prevent the submission of incorrect claims and combat fraudulent conduct. Internal controls efficiently monitor adherence to applicable laws and plan requirements. The OIG has developed compliance program guidance for individual and small group health care practices (Federal Register, Vol. 65, p. 59434, Oct. 5, 2000 – <http://www.gpoaccess.gov/fr/retrieve.html>). Providers may also obtain other compliance program guidance's on the OIG web site at <http://www.hhs.gov/oig>.

Reporting

New Directions maintains a Compliance Phone mail reporting Line (855-580-4871) where suspected fraud or abuse can be anonymously reported. Also, the New Directions Compliance Officer can be reached at 816-237-2300 if you have any questions about fraud or abuse or want to discuss suspected activities.

New Directions will not retaliate against any person who reports suspected fraud or abuse to it, the Federal or State government, or any other regulatory agency.

HIPAA Information

NOTICE OF PRIVACY PRACTICES

Effective April 14, 2003

Updated January 1, 2014

THIS NOTICE DESCRIBES HOW YOUR HEALTH CARE RECORDS MAY BE USED AND SHARED BY NEW DIRECTIONS, AND WHAT YOUR RIGHTS ARE FOR YOUR HEALTH CARE RECORDS. PLEASE READ CAREFULLY!

SUMMARY

This "Notice of Privacy Practices" describes how New Directions may use and share your health care records as you tell us or as the law allows or requires. A Federal law, the HIPAA Privacy Rule, requires New Directions to give you this Privacy Notice to read.

Your health care records are called "protected health information," which includes any information that relates to your health services and identifies you personally, such as your name, social security number, or address.

New Directions has certain legal requirements it must comply with to protect your health information. It must follow what this Notice says. You have the right to know about the legal duties and privacy practices required of New Directions.

You have certain rights to obtain and control your protected health information, which are described below. You also have the right to file a complaint if you believe your privacy rights have been violated. You may contact our Privacy Officer if you would like further information about your privacy rights or the complaint process by emailing: compliance@ndbh.com, or by calling: 816-237-2300 and request to speak to the Compliance Dept./Privacy Officer.

USES AND DISCLOSURES OF YOUR PROTECTED HEALTH INFORMATION

New Directions may be required or is permitted by law to share or use your protected health information without your authorization in the following situations:

- Treatment – The provision, coordination, or management of your health care and related services. Example: Disclose your health information to a hospital or doctor; call you with a reminder of your appointment; leave a message related to your treatment; follow-up after hospitalization.
- Payment – Determine if you're eligible for coverage of healthcare services; paying for your health care; claims management; reviews for medical necessity; and activities needed to obtain payment for your health services. Example: Obtaining approval for a hospital admission may require disclosure of certain protected health information to a physician reviewer or health plan.
- Health Care Operations – The functions and activities required for New Directions to function as a health plan and health care Provider. Examples: for the management of New Directions; developing or evaluating services; for accreditation and licensing activities
- Business Associates with whom New Directions contracts to perform services for New Directions
- Public Health Activities
- Health Oversight Agencies, including the Federal Department of Health and Human Services, for activities authorized by law such as audits, inspections, and investigations
- Law Enforcement, including the police, FBI Officers, and others who enforce laws
- Avoid a serious threat to the health or safety of an individual

If your health information includes alcohol or drug abuse treatment information, there are special Federal laws that may limit when and how this information can be used or disclosed.

INTERNAL PROTECTION OF PROTECTED HEALTH INFORMATION

New Directions protects your protected health information in many ways, as described in detail in our Policies which are available upon request. All employees, contracted persons, and others who may have access to protected health information sign an Agreement to maintain the confidentiality and security of the information. It also requires them to only access such information when it is needed for their job or another legal purpose.

Protected health information is most often stored in our computer. There are many requirements for safeguarding the information from someone who shouldn't have access to it, such as requiring special passwords that are regularly changed.

Protected health information is not sent in emails unless it is encrypted.

YOUR HEALTH INFORMATION RIGHTS

The law provides you with these rights related to your protected health information:

Inspect and Copy Protected Health Information

You may request to review and/or receive a copy of your protected health information created by New Directions in your "designated health information records." This includes: medical records (except for fitness of duty evaluations, FMLA reviews, second opinion evaluations, and raw test data); health information from third parties; billing records; enrollment, payment, claims adjudication, and appeal records; OPTAMUM and EAP Expert notes; and any other information used to make decisions about your health care. An Authorization Form is located on the website (www.ndbh.com) which must be completed and mailed or faxed to the Privacy Officer.

Restricting Protected Health Information

You may request that certain protected health information about you not be used or shared for treatment, payment, or health care operational purposes. However, New Directions is not legally required to agree to what restriction you're requesting.

Changing Protected Health Information

If you think that New Directions has protected health information about you that is incomplete or wrong, you may request that it be changed. If New Directions disagrees with your request, you will be notified in writing of the reason your request is being denied. Sometimes you can appeal that decision.

Accounting of Disclosures

All sharing of your information by New Directions after April 14, 2003 that isn't for treatment, payment, or health care operations or isn't made with your written permission must be recorded by New Directions. If you want a list of these disclosures, you may request them.

Alternative Means of Communication

If you want to receive communications from New Directions in a different manner or at a different location because of a potential danger to you, you may notify New Directions of this.

Disclosures to Plan Sponsors or Employers

New Directions complies with all applicable Federal and State laws to protect health information of employees and their eligible dependents and will only be disclosed to plan sponsors or employers as follows:

1. An individual's status as a participant in a group health plan;
2. Summary health information only for the purpose of obtaining premium bids from health plans or modifying, amending, or terminating the group health plan. "Summary health information" is not individually identifiable and reflects the claims history, claims expenses, and types of claims experienced by the covered individuals;
3. Protected health information if the plan documents of the group health plan have been reviewed to verify that they comply with all HIPAA requirements.

Paper Copy of This Notice

If you would like a paper copy of this "Notice of Privacy Practices" you may print it from our website at (www.ndbh.com) or request a copy be mailed to you.

TO USE ANY OF YOUR RIGHTS, OR DISCUSS THEM FURTHER, you may contact the New Directions Behavioral Health Privacy Officer at P.O. Box 6729, Leawood, KS 66206-0729 or **816-237-2300**, or compliance@ndbh.com.

THE PROVIDER'S ROLE

Providers provide an important component of New Directions Behavioral Employee Assistance Program.

Your Role

You provide assessment, short term counseling (where available and appropriate), referral and follow-up. Short term counseling sessions can range from 1 session to 12 sessions, depending on the Client's EAP benefit package.

Employee Health Plan Benefits

If the EAP benefit is exhausted and the Client requests counseling accessing his/her insurance benefit, you may self-refer, unless the Client requests a referral to someone else. If making a referral, please pay attention to the Client's available insurance benefits, Preferred Provider Organizations (PPO's), and Health Maintenance Organizations (HMO's).

Potential Conflicts of Interest

It is important that you maintain a neutral position with regard to potential adversarial situations between employee and employer. These include grievances, disability claims, harassment, wrongful termination, etc. If you are contacted by an attorney regarding a Client you are seeing or have seen for New Directions, please contact us **prior** to providing any information. If accusations of sexual harassment are made by a Client, **please notify** New Directions immediately. The EAP strives to help all parties utilize the employer's internal systems to resolve these difficulties.

You are a valued member of the **New Directions team**. With your assistance, our Clients receive quality services. Your efforts are greatly appreciated.

Information Changes

To avoid a delay in reimbursement of submitted billings, notify New Directions of changes of demographic or practice information:

Name Change

Primary practice or Billing location including phone/fax/email

Tax Identification Number (TIN) (must submit W-9 if TIN has changed)

National Provider Identifier (NPI)

Changes must be submitted in writing by filling the below form or submitting above details to the email address or fax below. Changes requested by phone will not be accepted.

Fax: 816-237-2371 ATTN: EAP PR | Email: EAP_PR@ndbh.com

EAP Address Update

PROVIDER NAME: _____ NPI: _____

*Cell Phone: _____ *Home Phone: _____

*Email: _____

*These details not shared with clients unless noted by provider:

Primary Service Location: _____ **EIN:** _____

(Street Address)

(City, State, Zip)

Phone _____ Fax _____

Additional Service Location: _____ **EIN:** _____

(Street Address)

(City, State, Zip)

Phone _____ Fax _____

Additional Service Location: _____ **EIN:** _____

(Street Address)

(City, State, Zip)

Phone _____ Fax _____

Billing and Mailing Address: (if different from primary)

(Street Address)

(City, State, Zip)

Phone _____ Fax _____

Please return with a current copy of W-9 listed with only the billing number registered with the IRS. If locations have separate EIN, please include W-9's for all. Please plan five business days for adjustments to go into effect.

[Email: EAP_PR@ndbh.com](mailto:EAP_PR@ndbh.com) | [Fax \(816-237-2371\)](tel:816-237-2371) ATTN: EAP)

Please note: Providers are responsible for ensuring authorizations, including billing sheets, are correctly attributed to the location requested. Addresses are listed on the front page of the authorization and the lower left corner of the billing page. More information may be found on our website.

CLIENT ACCESS PROCESS

1. Client contacts New Directions and speaks to member of New Directions EAP Team. Clients are screened to determine if appropriate for telephonic sessions and to verify that the Client's situation is not critical. Client Referral Appointment Timelines:
 - a. Emergent: must be seen in <6hours
 - b. Urgent: 24 hours
 - c. Supportive: offered or recommended within 72 hours
 - d. Routine: offer appointment 72 hours of call, and scheduled within 7 days
2. New Directions gathers Client demographic information to include name, city/state, phone number and the name of employer
3. New Directions has two processes to connect a Client to a Provider: Connecting Client to Provider at time of call or providing list of Provider names.
 - a. Connecting Client to Provider at time of call:
 - i. New Directions staff conferences a call to the provider's office to refer the member and schedule the appointment.
 - ii. If a connection is made with the provider or their office staff, an appointment is scheduled.
 - iii. If a voicemail is reached, a detailed message is left with the provider, providing information about the referral and asking the provider to contact the member to schedule an appointment. The New Directions Staff then goes back to the member and informs him/her that the provider should contact them to schedule an appointment.
 - iv. Authorization for sessions is emailed/faxed to Provider at that time.
 - b. Providing a list of Provider's names:
 - i. New Directions will give the Client up to six (6) Provider names and phone numbers. The Client will be instructed to contact Provider to schedule appointment.
 - ii. After the appointment is scheduled, the Provider will contact New Directions Customer Service (800-624-5544) with Client's name or file number and date of appointment. At that time, authorization information and billing form will be sent to the Provider. **Failure to obtain an authorization may result in denial of payment.**
 - iii. Provider will be advised of the session benefit on authorization sent. The number of sessions available vary by company. A referral for ongoing counseling should be made early in the process if the Client presents with situations outside the brief counseling/therapy focus of EAP.
4. If the Client decides to see a provider telephonically, they may determine after the first telephonic session to see a clinician face-to-face. The Client should contact New Directions Customer Service. If the Client is in your area they may ask to transition to your physical office. Telephonic sessions count toward the Client's total session benefit.

California Providers Only: To comply with the California Knox-Keene law, New Directions will only authorize a total of three (3) sessions per Client no matter what the EAP benefit is.

BALANCE BILLING AND NO SHOW GUIDANCE

** The Provider agrees not to charge Covered Persons, their employers, or their health insurance providers additional fees (i.e., "balance billing"), in addition to, in excess of, or in lieu of, the agreed upon fee schedule for specific listed services. No co-pay is to be collected from the Covered Person.

** No-Show Appointments: There will be no compensation for no-show appointments or cancellations if the no-show or cancellation occurs on the first scheduled appointment. If the Covered Person attests in writing that they will adhere to the Provider's no-show and cancellation policy a Covered Person may be charged for no-shows and cancellations occurring subsequent to the first successfully completed appointment. The terms detailing the no-show and cancellation policy to the Covered Person must be clearly understandable, reasonably allowing for emergency related cancellations, and should be conspicuous enough that the Covered Person should clearly understand to what they are agreeing.

Statement of Rights and Responsibilities for Clients

Clients have the right to:

1. Receive information about New Directions, its services, its Network Providers and Providers, and their rights and responsibilities.
2. Be treated with respect and receive recognition of their dignity and right to privacy.
3. Participate with Network Providers and Providers in decisions about their health care.
4. Receive a candid discussion of appropriate or medically necessary treatment options for their health conditions, regardless of cost or benefit coverage.
5. Voice complaints or appeals about New Directions or the care it provides, either verbally or in writing, and obtain prompt resolution.
6. Make recommendations regarding this Statement of Rights and Responsibilities for Members and Clients.

REFERRAL GUIDELINES

New Directions recommends the least intrusive intervention necessary for resolving a problem.

Treatments should:

1. Be brief;
2. Support and build on existing strengths;
3. Foster independence;
4. Encourage use of a variety of community resources such as AA and other self-help groups.

If the Client requires long-term therapy, or wants to continue counseling beyond the EAP benefit, you may self-refer the Client. However, it is very important the Client also be offered a referral to another Provider within the Client's applicable insurance network. Should you choose to self-refer, please utilize the below form.

You are responsible for finding appropriate, quality services for Clients in need of referrals beyond the EAP benefit. You are also responsible for assisting Clients with insurance benefit questions.

For outpatient referrals of Clients, you should consider the Client's clinical needs, geography, financial resources and personal preferences. It is your responsibility to refer Clients to resources covered by the Client's and within the insurance's Provider Network when available and appropriate. If you need assistance, please call New Directions Customer Service 800-624-5544.

For cases you plan to refer, please call the Provider to determine availability and willingness to accept the case. If there is no Network Provider available, choose a provider in the community following the guidelines above. Help determine whether the Client can afford the Provider or if the Provider will "slide" their scale.

Many companies offer several insurance plans and make changes frequently. It is strongly recommended that Providers confirm benefits directly. Also, encourage the Client to confirm eligibility and coverage with the insurance carrier again just before the first visit.

Notice of Informed Consent for Continuation of Treatment with a Provider upon Completion of the EAP Sessions

It is the policy of New Directions (and the therapists who provide EAP services) to advise you about other resources when treatment past the EAP benefit is needed. They can also educate you as to the different kinds of treatment modalities. This policy is in place to assure a referral to the clinician or service with the most expertise in your appropriate area. This includes continuing treatment with your current provider.

We ask that you read this and sign below, indicating that you have been informed of your rights to a variety of other resources.

I have been informed by my current provider of the availability of other resources.

I understand that New Directions will no longer be financially responsible for services as the benefit has been fully utilized. I will be responsible for payment of any continuing services, whether through my insurance or self-pay.

I understand that I can call the New Directions toll-free phone number (800-624-5544) to discuss other possible benefit resources and referral options.

Signature of Client:_____

Signature of EAP Provider:_____

Date:_____

*Provider: Please have this signed and kept with your records.
This is not to be returned to New Directions Behavioral Health.

SUPERVISORY REFERRALS

The majority of New Directions Clients access services on a voluntary basis. Occasionally, the employer will mandate that an employee have EAP sessions as part of a corrective or disciplinary action.

A supervisory or mandatory referral may mean that the employee is at risk for termination without an EAP assessment and follow through on recommendations. When New Directions refers one of these cases to you, you will be given specific instructions on how to handle the case.

As a reminder - please note that all communication to the employer regarding these cases must come from New Directions.

SUPERVISORY/MANDATORY REFERRAL GUIDELINES

Please follow these procedures for a supervisory/mandatory referral from New Directions:

1. New Directions will refer the employee to you with demographics, the job performance issue, the substance(s) found in a positive (+) drug screen, and specific details regarding the referral.
2. Whenever an appointment for the assessment/evaluation is not scheduled at the time of the referral, either the employee will be asked to contact you, or you may be asked to contact the employee to schedule the appointment.
3. Prior to meeting with the employee, the Management Consultation and Support Care Manager contacts the provider to explain the reason for the referral.
4. After the first session, contact the assigned **Care Manager** at **800-624-5544** to review your findings and recommendations, and to collaborate regarding the development of a treatment plan.
5. During the next session, discuss the recommendations with the employee. *Please note:* the assigned **Care Manager** will communicate with the employer regarding the employee's compliance.
6. When a treatment referral has been arranged, please inform the MCS Care Manager and they will case manage the case and the employee's progress in treatment. The Care Manager will reach back out to you if/when the employee is ready to resume outpatient treatment. EAP sessions associated with management referrals are to be billed to New Directions EAP, P.O. Box 6729, Leawood, KS 66206-0729. Or, the reimbursement request can be faxed to 816-237-2363. **The employee is not to be billed.**
7. Whenever the employee becomes non-compliant with treatment recommendations, treatment requirements, or fails to attend scheduled appointments, notify the assigned **Care Manager** immediately.

Care Coordination
(800) 624-5544

PROTOCOL FOR THREATS OF VIOLENCE IN THE WORKPLACE

If a Client is referred for making a threat directed at the workplace, gather as much data as possible including:

1. Exact words used in threat, name of potential victim and Client's relationship to potential victim.
2. Details about circumstances surrounding threat.
3. Previous history of suicide attempts or violent episode, with as much detail as possible regarding any history.
4. Determine if alcohol or drugs are involved.

Contact New Directions (800-624-5544).

Warn potential victim(s) if appropriate

If decision is made to warn:

- a. Contact New Directions; and
- b. Advise potential victim of threat.

Call police, if appropriate.

Hospitalize Client, if appropriate.

Keep New Directions informed of all developments.

Employee Assistance Program (EAP) Authorization and Billing Process

Authorization

In an effort to make the authorization process easier for our EAP providers, New Directions EAP offers an authorization prompt on its telephone system (800-624-5544, prompt 2). EAP providers can request an EAP authorization by leaving a brief voicemail message. Upon receipt of your message, New Directions will fax or mail you the authorization.

In the voicemail, please provide the following information only:

1. Provider full name
2. Provider phone number
3. Client's name and file number
4. Date, time, and location of appointment

If additional information is required, a New Directions Customer Service representative will contact the provider. Please remember that authorizations must be requested within 30 days of the initial session.

Billing

The authorization is two pages. The first page is the cover page, and the second page is the authorization and billing sheet. Please note that all sections of the billing sheet must be complete to receive reimbursement of services. Providers may submit billing on an interim basis or at the completion of all sessions, but must be within 90 days of the last session. Closing information, signature and date of case closing must be included when submitting the invoice after the final completed session; payment will be denied without this information. All sessions should be completed prior to the stop date. An extension of the stop date may be requested by calling 800-624-5544. Extensions may be permitted up to 30 days. Billing may be submitted either via postal mail, or by faxing to 816-237-2363, as indicated on the billing form. We do not accept billing submissions via email at this time.

New Directions' EAP offers two alternative types of payment methods: paper check or via electronic funds transfer (EFT). **Payments will be generated and either mailed or deposited approximately 30 business days from the date that the billing submission was approved for payment processing.**

- Checks are mailed Monday with explanation of benefits (EOB) included, and arrive within 7-10 business days.
- If this is the first time receiving payment from New Directions EAP, a paper check will be mailed; for providers wishing to receive payment via EFT, the included Direct Deposit Authorization form must be returned to the appropriate department, for future EFT payments.
- Email messages for EFT transactions are sent on Thursday, confirming that a deposit will be made between Friday and the following Tuesday, depending on the receiving bank.
- EOBs for EFT payments are mailed Monday and will arrive in 7-10 business days.

Questions? Please contact Customer Service at 800-624-5544 (toll free) or 816-237-2352 between 8 a.m. and 5 p.m. CST. Thank you!

EAP Provider Coordination

t (800) 624.5544 | f (816) 237-2371 ATTN: EAPPR
EAP_PR@ndbh.com
New Directions | ndbh.com

EAP Billing Coordination

t (800) 624.5544 | f (816) 237-2363
EAPBilling@ndbh.com
New Directions | ndbh.com



New Directions Behavioral Health Direct Deposit Authorization

Please enroll me in New Directions Behavioral Health's (NDBH) Direct Deposit Program. I authorize NDBH to make payment for my services provided by initiating credit entries or correcting entries to the bank account shown on the attached voided check.

Following each ACH payment transfer, you can be notified by e-mail (up to three email addresses) by including an email address below. An *Explanation of Benefits* will be mailed to EAP providers for posting the payment appropriately.

I understand that this authorization will continue in force until discontinued by my written request. I have attached a copy of a voided check.

Name/Company: _____

Authorized Signature (Physical Signature Required): _____

Date: _____ Business Phone: _____

1st Email address (max 30 characters): _____

2nd Email address (max 30 characters): _____

3rd Email address (max 30 characters): _____

Name of Bank: _____

Bank Routing Number: _____

Bank Account Number: _____

Bank Account Type (Check One): CHECKING SAVINGS

Please return this form via:

Fax to the attention of
Accounts Payable:
816-523-3514

Mail to:
New Directions Behavioral Health
Attn: Finance, Accounts Payable
P.O. Box 6729
Leawood, KS 66206-0729

Scan and email:
ap@ndbh.com

Additional Information: ACH payments are processed every Friday except for holidays.

EAP Do's and Don'ts

Serving our EAP Clients means knowing some “basics” about how the EAP process operates. The following reviews how we can work together to increase Client and company satisfaction.

DO:

- Contact New Directions with questions regarding Client referrals, authorizations, billing procedures or additional sessions at (800) 624-5544.
- Respond to referral phone calls within 24 hours, even if you cannot accept a referral. It is our policy to have Clients in contact with a Provider within 24 hours to schedule an appointment.
- Contact New Directions immediately with issues concerning your Client's workplace, such as safety, hostile work environment, sexual harassment, leave of absence, disability forms/questions and legal documents.
- Contact New Directions if the Client is in a court referred program.
- Contact New Directions if a Client indicates he/she has been referred by the employer because of sexual harassment issues.
- Contact New Directions before completing any legal documents or preparing reports for a legal system, such as requests from judges, court advocates or attorneys. If you receive subpoenas and court orders, you may also want to contact your attorney for advice.

DON'T:

- Fill out forms for Client without first contacting New Directions to discuss the Client's request. This includes requests for personal leave, short term disability forms, and family medical leave forms.
- Contact the Client's employer or related organization (e.g. union). New Directions will handle those types of communications, or authorize on a case by case basis.
- Do not send letters requested by a Client to the employer without first talking with New Directions.
- Make disparaging remarks or “innocent” remarks that could be interpreted as negative comments about the employer. If you have concerns about a workplace environment, call and discuss with New Directions. **Do NOT initiate contact with the employer.**
- Encourage a Client to file a lawsuit against his/her company. Refer Client to another resource for further assistance in a legal matter and call New Directions to discuss.
- Inform an employer, verbally or in writing, that a Client is “fit for duty.” This requires a fitness for duty evaluation. Contact New Directions.