SERVICE AGREEMENT

Services: Your EAP is designed to provide short-term psychological services (up to 6 free sessions) for OSU-Stillwater benefits eligible employees and their dependents. With few exceptions, no billing or other communication will be exchanged with any other persons or entities without your written consent.

Confidentiality: Treatment records are stored in a separate and secure database that is not associated with University personnel files or educational records. The EAP provider is required to follow practices outlined by HIPPA Notice of privacy practices and/or the Family Educational Rights and Privacy Act (FERPA) in the event you have student status. Except in specified circumstances outlined by HIPPA/FERPA and/or listed below, information you provide will not be disclosed without your written permission:

- **When required by law:** If we have reason to believe that you are in danger of physically harming yourself or someone else, if we suspect a child or vulnerable adult is being physically or sexually abused or neglected, or in response to a court order, the EAP provider is legally required to report the necessary information to the proper authorities or another person as needed.

- **Supervisor referrals:** If you are an employee facing a formal referral to EAP services as a condition of your employment, you might be asked to sign a release of information form allowing the EAP provider to communicate with your supervisor regarding performance issues and your progress towards improving them. Although the EAP is a voluntary program, your continued employment could depend on correcting any job performance deficiencies. However, you maintain the right to refuse signing a release form.

- **Other situations in which information may be disclosed:** Persons being seen in couple, family, or group counseling are encouraged to respect the confidentiality of others. However, the EAP provider cannot guarantee that confidentiality will be maintained by the other participant(s). Additionally, the EAP provider may work with other professional staff for supervision or consultation to provide you with the best possible care. In these cases, your provider will make every effort to protect any identifying information about you.

- **Treatment of minors:** Minors under the age of 18 do not have full confidentiality from parents or legal guardians unless they are being seen for crisis intervention or in other specified exceptions outlined in a separate form.

- **Use of Technology:** It is our policy to refrain from using email as a form of communication due to the inability to ensure confidentiality. However, in circumstances where electronic communication may be necessary or preferred, you may exchange electronic communication with your EAP provider by utilizing the UHS patient web portal. This portal has a secure messaging feature that allows the provider and patient to communicate through a secure and private platform which can be accessed by logging onto: [http://okstateportal.pointnclick.com](http://okstateportal.pointnclick.com)

  The following applies to all electronic communication:
  - Electronic communication via the secure web portal should only be used as a means of limited information exchange. It will be kept and stored in your record.
  - Electronic communication via the secure web portal is not to be used as an urgent or emergency form of contact as your provider may not have the opportunity to review your message in a timely manner.
  - Limits of confidentiality apply to electronic communication. Should you report any abuse, imminent self-harm or harm to others, etc., the information will be disclosed to appropriate persons or authorities.
  - Electronic communication is not a substitute for therapy. If your message contains information more appropriate to an in-person discussion, you will be referred to schedule an appointment.
Missed Appointments and Cancellations: If you are unable to attend a scheduled session, please call (and/or leave a voicemail) 24 hours in advance to cancel or reschedule the appointment. A no show or late cancellation will be counted as one of your free sessions with the exception of extenuating circumstances.

Termination/Referral: After 90 days of no client contact, it will be assumed that the client wishes to terminate clinical services with the EAP provider. The therapeutic relationship will be considered terminated at this time and the clinical record will be closed. However, this does not prohibit the client from re-establishing services in the future. If it is determined that client needs are beyond the scope of the EAP provider services (i.e., disability determination, forensic psychology/legal issues/comprehensive psychological assessments and reports), the client will be referred to the appropriate resource and the employee’s insurance coverage may be activated for services.

Feedback: The EAP provider welcomes positive and constructive feedback about services you receive. You have the right to report concerns or grievances. Contact the Director of University Health Services (405-744-7665).

Emergency Services: If you experience a crisis, the following options should be considered:

- If it is an imminent or life threatening emergency, call 911 or go to the nearest emergency room.

- ComPsych GuidanceResources® is available to you 24 hours a day, 7 days a week. Access your GuidanceResources® benefits by:
  - Calling 855.850.2397. You’ll speak to a counseling professional who will listen to your concerns and guide you to the appropriate services you require.

I have read and understand this Service Agreement for EAP psychological services at OSU University Health Services.

Client Signature ___________________________ Date ________________ Print Name/ CWID ___________ 7/18

Signature of Parent or Guardian ___________________________ Date ________________ Print Name/ CWID ___________ 7/18