



# EMPLOYEE ASSISTANCE PROGRAM

Administration manual

Together, all the way.®



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# WELCOME TO CIGNA

Welcome to Cigna's Employee Assistance Program. Since 1974, we've provided mental health services to organizations like yours. As a national Employee Assistance Program (EAP) vendor, we're committed to providing your organization with:

- › Timely access to professional, confidential clinical services
- › Support, information and assistance to managers who are struggling with employee performance issues
- › Employer services that support the use of the EAP as a management tool
- › Reduced risk and expense from health issues, workers' compensation and disability
- › Help communicating the importance of each employee's total well-being
- › Enhanced employee morale, company loyalty, reduced absenteeism and increased productivity
- › Assistance to comply with government and industry regulations

We've designed this EAP manual to introduce you to the operational side of our EAP. This manual is a helpful resource; please review it thoroughly. If you have additional questions, contact your Account Manager.

# CUSTOMER SERVICES

## The Cigna EAP provides your employees with access to the following services:

- › 24/7 phone consultation
- › Online services
- › Self-assessment tool
- › Healthy Rewards®\*

## A note about confidentiality

The EAP is voluntary and confidential. Privacy is required by law when an employee self-refers. The success of our EAP is, in part, based on Cigna's commitment to protecting the privacy rights of our customers and members. Therefore, no information will be shared with anyone without the written consent of the employee.

## Access

- › **Call Cigna – Speak with a Personal Advocate**
- › **Go online – Visit CignaBehavioral.com**

Your organization's employees and managers can access Cigna's Employee Assistance Program services by phone or online 24 hours a day, 7 days a week.

When a customer needs help, they make a toll-free call to speak with an experienced professional, available any hour of the day or night. When calling, the customer will talk to a Personal Advocate who will review the situation and determine the appropriate next steps. Those steps will depend on the situation.

## Crisis intervention services

Our Personal Advocates are able to quickly connect the customer to a crisis clinician. The crisis clinician will immediately help the individual and help them get the appropriate services until the situation has stabilized.

## Community resources

Community resources are often an important component of our EAP. Cigna refers participants to local resources as another source of support and education for their issues. We have many community resources, including: AIDS support groups, Alzheimer's support groups, bereavement support and consumer credit counseling services to name a few.

## Online services

Customers have access to online services provided through CignaBehavioral.com. The following links can be found on the home page.

- › **Take a self-assessment** on your stress level and learn how to manage stress through the stress toolkit.
- › **Browse behavioral articles/information** – hundreds of articles on various behavioral health topics.
- › **Look up your benefits**
- › **Click to chat** – connect with a Personal Advocate to verify benefits, obtain community resources and more.
- › **Frequently asked questions**
- › **Visit our Education and Resource Center** – Healthy Rewards, health information and programs and forms

## Healthy Rewards

Through the Healthy Rewards program, Cigna offers customers discounts on a wide range of complementary health care services and products. Customers enjoy unlimited access to Healthy Rewards products and services whenever they want – without referrals, visit maximums or claim forms. Customers can call the toll-free phone number (**800.870.3470**) or log in to **CignaBehavioral.com** to receive information on programs, services and local providers. To get the discounted fees, customers simply present their Cigna ID card to the Healthy Rewards vendor.

\* Some Healthy Rewards programs are not available in all states, and programs may be discontinued at any time. If your health plan includes coverage for any of these services, this program is in addition to, not instead of, your plan coverage. A discount program is NOT insurance, and you must pay the entire discounted charge.

# ORGANIZATIONAL SERVICES

## Account management

Your Cigna Account Management Team includes individuals who deliver expertise at every level of service. We've selected your Account Management Team based on their collective strengths and vision. They strive to:

- › Provide your employees access to clinical services and treatment when appropriate.
- › Establish collaborative relationships with network providers.
- › Seamlessly incorporate our program into your operation.

## Employer Service Hours

Your EAP program will be allocated a company-specific number of Employer Service Hours (ESHs). These hours are built into the total EAP price and will be identified in the EAP Service Agreement. Your assigned Account Management Team will work with and assist you in developing a customized plan to maximize the benefit of your ESHs and meet the unique needs of your organization.

ESHs are available beyond the allocated amount. Additional service hours may be purchased on a fee-for-service basis. Contact your Account Management Team for pricing information.

The ESHs may be used for the following.

- › **Executive briefings** are a brief overview of the organizational and individual benefits of your EAP. They also provide insight into the value of the EAP and the importance of management support in the program's success.
- › **Manager/supervisor training sessions** equip your managers with tools to recognize, manage and assist employees who may have personal problems that impact job performance. Cigna can also conduct training sessions that help managers and supervisors identify behaviors that indicate possible workplace use of drugs and alcohol.

- › **Promotional activities and communications** establish plans for the EAP as well as promote EAP resources at health fairs. Additional EAP-related activities may be coordinated with the EAP manager.
- › **Employee and manager orientations** are presentations that provide EAP information and encourage early access for personal concerns.
- › **Wellness seminars** provide onsite health promotion. They address common personal or work-related concerns and give employees comprehensive information on how to handle these issues. Within the catalog you will find a pre-seminar "to-do" list to assist in planning an onsite event.
- › **National EAP Wellness Seminars:** Live and on-demand replay presentations of popular seminar topics are delivered monthly via streaming webcasts. A certificate of attendance is available for these seminars.

**IMPORTANT: Please allow four weeks' notice to schedule onsite services (with the exception of Critical Incident Stress Management services).**

**Cancellation policy:** Please provide at least five full consecutive business days' advance notice when canceling onsite services (or changing dates/times). In the event of a short-notice cancellation, ESHs will be charged as if the onsite service actually occurred.

# ORGANIZATIONAL SERVICES (continued)

## Critical Incident Stress Management

Critical incidents impact an entire organization and typically impede productivity. A critical incident is any situation that causes a work group to experience strong reactions that have the potential to interfere with present or future productivity. Cigna's Critical Incident Stress Management services are immediately available to address issues of crisis that result from:

- › Natural disasters
- › Employee deaths
- › Industrial accidents
- › Mass transportation accidents
- › Robberies
- › Assaults
- › Other traumatic events
- › Major organizational change
- › Witness to accidents or trauma

When we respond to workplace trauma, our team:

- › Helps employees normalize feelings as quickly as possible.
- › Hastens a return to productivity and health.
- › Prevents or mitigates long-term stress responses.
- › Enhances the employee's overall adjustment at work and at home.
- › Supports the organization's normal functioning.

Critical Incident Stress Management services are available immediately, **24 hours a day, 365 days a year**. To access these services, your management staff calls the toll-free EAP access number to report the critical incident. As a first step, we conduct a crisis management consultation with the manager reporting the incident. Next, we discuss the specifics of the incident. Then, our team works with the manager to determine an appropriate level of response.

## Organizational consultation

Organizational consultation is provided by Cigna for issues impacting the workplace where EAP services could be helpful. For example, the EAP could help your management with workplace issues such as:

- › Downsizing
- › Mergers
- › EAP communication and promotion
- › Employee orientations/management training
- › Wellness seminars
- › Disaster response
- › Critical Incident Stress Management
- › Professional coaching
- › Department of Transportation (DOT) guidelines/substance abuse professionals
- › Drug-free workplace issues
- › Mediation services
- › Nuclear Regulatory Commission

## The critical incident experience

When your organization needs support during a crisis, call Cigna. An Employee Assistance Consultant can consult with you and develop a personalized response plan.

We can also arrange for an onsite EAP Health Care Professional to help your employees deal with the incident.



# ORGANIZATIONAL SERVICES (continued)

## Management consultations

Management consultation services are available 24/7, on an unlimited basis, to assist managers and supervisors with workplace issues. Our management consultation team is made up of licensed mental health professionals who are also Certified Employee Assistant Professionals (CEAP). They have provided guidance to leaders regarding concerns such as:

- › Company layoffs
- › Effective leadership
- › Employee appearance and hygiene issues
- › Referring employees to the EAP
- › Employee job jeopardy problems
- › Drug, alcohol and other company policies
- › Critical incidents
- › Employee grief and loss
- › Violence in the workplace
- › Job-appropriate behavior
- › Employee chronic/terminal illness



## The manager experience

An Employee Assistance Consultant can consult on absenteeism, troubled employees or performance issues. Call Cigna to speak to an EAC whenever you need support and advice.

# COMMUNICATION MATERIALS

We believe that proactive employee communication is vital to the success of your EAP. That's why we offer a comprehensive communication program designed to inform your employees of the services available under their Cigna benefits. Our communication program is comprised of printed items, electronic documents and online materials.

The following communication materials are available for your use and will be sent to you before your start date.

## EAP employee brochure with wallet cards

This brochure informs employees and their families about all the services available to them through their EAP. It includes clear instructions for accessing the program.

## EAP poster

Display your EAP poster in high-traffic areas throughout your company, including the lunchroom, lounge and hallways. It's an excellent reminder to your employees that they have EAP services available 24/7.

## Electronic materials

Periodic reminders are a great way to keep your employees motivated to take part in the programs. You can distribute most of these resources by email, print, online post or as a desk-drop.

- › Flyers (available in English)
- › Ecards (available in English and Spanish)

Visit **CignaBehavioral.com** and click on the "Benefits Manager" tab for links to all the electronic communications.

## Webcast seminars

Promotional flyers are available for the monthly EAP webcasts.

## Materials for additional cost

A magnet, business card and postcard are available for additional cost.

## Ordering additional materials

If you are interested in ordering additional communication materials, please contact your Account Management Team or visit the Cigna website.

- › Go to **CignaBehavioral.com**
- › Click on "Benefits Managers" tab
- › Click on "Promotional communications"
- › At the bottom of the page, click on the link "AccountServices@Cigna.com." Please be sure to include:
  - Type of materials needed
  - Quantity
  - Shipping address
  - Shipping contact name and phone number
  - Your name and phone number (in case we need to contact you with questions)

## Sample communications

For your convenience, we've developed promotional materials to help you introduce the EAP to your company. To obtain samples of the items listed below, please contact your Account Management Team.

- › EAP videos
- › Flyers
- › Ecards
- › Magnets/postcards/business cards



# CUSTOMER REPORTING

## Employee Assistance Program reporting

Our online reporting package helps identify issues of concern - with both employees and their families. These issues could affect employee performance and productivity. It is presented in a meaningful, easy-to-read format and includes organization-specific information.

Your reports are available online at **CignaBehavioral.com**. Your Account Manager will provide you with a unique login ID and password.

Cigna's quarterly EAP reporting defines, at an aggregate level, the demographics of who is accessing care through your EAP, the problems identified and the referral recommendations made.

We offer a full array of reports, including:

- › Monthly Overview of Services Provided
- › Presentation profiles
- › Assessment profile
- › Demographics
- › Closed cases and referral recommendations

## Monthly overview of services provided

This report identifies how many customers access care through your EAP and the reasons for calling. We include the number of presentations, which is all individuals calling the EAP for assistance each month. The source of presentation indicates who is making the call and shows the level of involvement in the EAP by both employees and managers.

<b>XYZ Corporation</b> Monthly													
Overview of Services Provided													
Plan Year: 01/01/2015 - 12/31/2015													
Run Date: 01/01/2016													
CUSTOMER TOTALS													
	Jan	Feb	Mar	Apr	May	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Number of People Presenting	331	288	358	305	306	318	273	307	320	312	308	229	3655
Source of Presentations													
Self Referral	313	269	332	292	295	304	256	291	302	303	301	220	3478
Manager/Supr. Referral	10	10	10	6	2	6	8	5	4	2	4	2	69
Mandatory Referral	0	2	4	3	3	3	4	6	1	4	0	1	31
DOT	0	0	0	0	0	0	0	0	0	0	0	0	0
Fitness for Duty	0	0	0	0	0	0	0	0	0	0	0	0	0
Other	0	0	0	1	2	0	0	0	0	0	0	0	3
Critical Incidents	6	4	4	3	1	4	1	3	12	1	2	3	44
Management Consultations	2	3	8	0	3	1	4	2	1	2	1	3	30
*Crisis Calls	30	25	30	30	31	31	22	26	31	23	36	30	345
*On-Site EAP Contacts	0	0	0	0	0	0	0	0	0	0	0	0	0
*Telephonic Consultations	16	12	17	28	16	15	16	14	20	20	16	13	203
Number of Employees	83126	82515	81227	80866	80414	77172	77461	77403	77042	75996	73017	73017	939256
<u>Annualized Presentation Rates</u>													
Assistance Program	4.0%	3.6%	4.4%	3.8%	3.9%	4.1%	3.5%	4.1%	4.3%	4.2%	4.2%	3.2%	3.9%
Life Events Program	0.7%	0.6%	0.9%	0.7%	0.7%	0.8%	0.7%	0.6%	0.7%	0.8%	0.8%	0.5%	0.7%
<b>Total</b>	<b>4.8%</b>	<b>4.2%</b>	<b>5.3%</b>	<b>4.5%</b>	<b>4.6%</b>	<b>4.9%</b>	<b>4.2%</b>	<b>4.8%</b>	<b>5.0%</b>	<b>4.9%</b>	<b>5.1%</b>	<b>3.8%</b>	<b>4.7%</b>
*These categories are a sub-set of the "Number of People Presenting" and are already reflected in the total.													
Run Date: 01/02/2013													

# CUSTOMER REPORTING (continued)

## Presentation profiles

This report indicates the number of people presenting in each problem category. Presenting problem indicates the problem as defined by the caller.

**XYZ Corporation**  
Presentation Profile - Assistance Program  
Plan Year: 01/01/2015 - 12/31/2015  
Run Date: 01/01/2016

CUSTOMER TOTAL						
Presenting Problem	Employee	Spouse/ Partner	Dependent	Other	Total	Percentage
Alcohol Problem	26	11	12	1	50	1.6%
Drug Problem	19	9	25	0	53	1.7%
Family Concerns	329	23	146	1	499	16.2%
Child/Parenting	24	1	52	0	77	2.5%
Developmental/Attention Issues	12	1	109	0	122	4.0%
Marital/Partner	419	45	6	0	470	15.2%
Abuse: Sexual, Physical, Emotional	8	2	20	0	30	1.0%
Physical Health	25	1	3	0	29	0.9%
Sexual Disorders	2	0	2	0	4	0.1%
Depression Concerns	239	54	109	0	402	13.0%
Stress/Anxiety	375	25	61	0	461	14.9%
Suicidal/Homicidal	10	3	11	0	24	0.8%
Grief and Loss Issues	63	5	25	2	95	3.1%
Eating Disorder Issues	7	0	1	0	8	0.3%
Anger Management	37	11	43	0	91	2.9%
Job/Career Issues	96	3	0	0	99	3.2%
Workplace Aggression	4	1	0	1	6	0.2%
Unidentified	0	0	0	1	1	0.0%
Gambling	2	0	0	0	2	0.1%
Information Only	314	51	107	1	473	15.3%
Management Consultations	22	0	0	69	91	2.9%
	<b>2033</b>	<b>246</b>	<b>732</b>	<b>76</b>	<b>3087</b>	<b>100.0%</b>

**XYZ Corporation**  
Presentation Profile - Overall  
Plan Year: 01/01/2015 - 12/31/2015  
Run Date: 01/01/2016

CUSTOMER TOTAL	Period		YTD	
	Number	Percentage	Number	Percentage
Alcohol Problem	17	2.0%	50	1.4%
Drug Problem	13	1.5%	53	1.5%
Family Concerns	110	13.0%	499	13.7%
Child/Parenting	10	1.2%	77	2.1%
Developmental/Attention Issues	27	3.2%	122	3.3%
Marital/Partner	106	12.2%	470	12.9%
Abuse: Sexual, Physical, Emotional	14	1.7%	30	0.8%
Physical Health	6	0.7%	29	0.8%
Sexual Disorders	1	0.1%	4	0.1%
Depression Concerns	85	10.1%	402	11.0%
Stress/Anxiety	120	14.1%	461	12.6%
Suicidal/Homicidal	7	0.8%	24	0.7%
Grief and Loss Issues	22	2.6%	95	2.6%
Eating Disorder Issues	6	0.7%	8	0.2%
Anger Management	17	2.0%	91	2.5%
Job/Career Issues	19	2.2%	99	2.7%
Workplace Aggression	0	0.1%	2	0.2%
Information Only	118	13.9%	473	12.9%
Unidentified	0	0.0%	1	0.0%
Management Consultations	17	2.0%	91	2.5%
Relocation Issues	0	0.0%	4	0.1%
Concierge Services	0	0.0%	0	0.0%
Convenience/Personal Services	0	0.0%	1	0.0%
Pet Care	1	0.1%	1	0.0%
Healthy Rewards	1	0.1%	11	0.3%
Education/College	2	0.2%	5	0.1%
Eldercare	2	0.2%	6	0.2%
Childcare	8	0.9%	32	0.9%
Legal	103	12.1%	458	12.5%
Financial	15	1.8%	50	1.4%
	<b>849</b>	<b>100.0%</b>	<b>3655</b>	<b>100.0%</b>

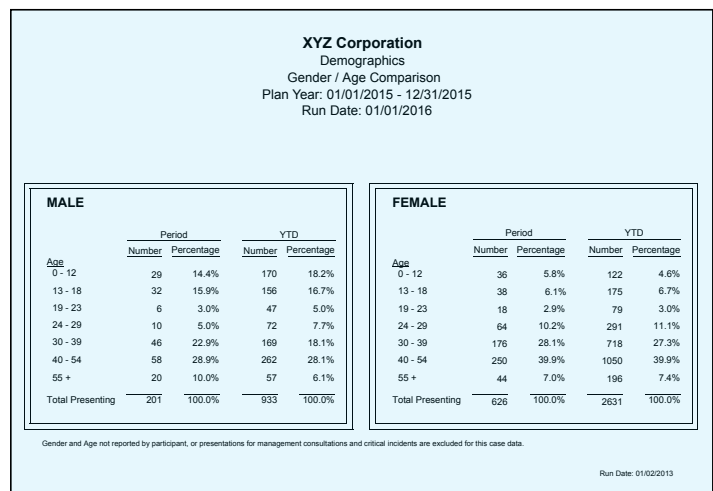
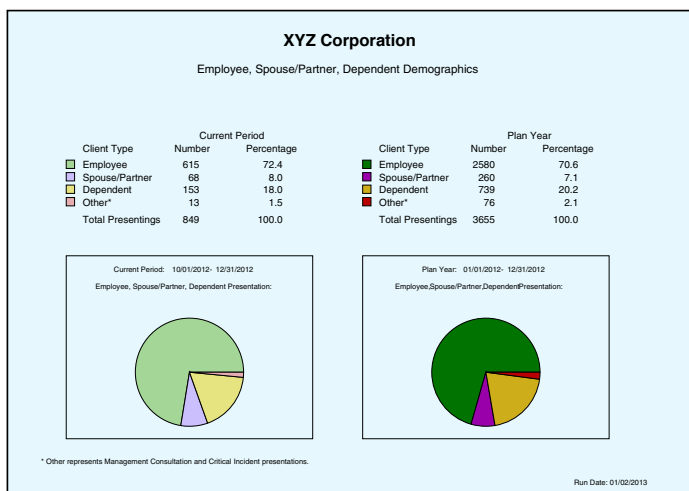
Run Date: 01/02/2013

**XYZ Corporation**  
Presentation Profile - Life Events  
Plan Year: 01/01/2015 - 12/31/2015  
Run Date: 01/01/2016

CUSTOMER TOTAL						
Presenting Problem	Employee	Spouse/ Partner	Dependent	Other	Total	Percentage
Relocation Issues	1	0	3	0	4	0.7%
Concierge Services	0	0	0	0	0	0.0%
Convenience/Personal Services	1	0	0	0	1	0.2%
Pet Care	1	0	0	0	1	0.2%
Healthy Rewards	10	0	1	0	11	1.9%
Education/College	5	0	0	0	5	0.9%
Eldercare	5	1	0	0	6	1.1%
Childcare	31	1	0	0	32	5.6%
Legal	443	12	3	0	458	80.6%
Financial	50	0	0	0	50	8.8%
	<b>547</b>	<b>14</b>	<b>7</b>	<b>0</b>	<b>568</b>	<b>100.0%</b>

## Demographics

These reports indicate the member type (employee, spouse or dependent), gender and age of customers.



# CUSTOMER REPORTING (continued)

## Assessment profile

This report details the final assessed problem as a result of a phone or face-to-face EAP assessment. This measurement also serves as a comparison to the initial presenting problem. By comparing presented and assessed problems, we can see that EAP intervention and assessment helps people more accurately define the underlying issues connected to presenting problems. This assessment can also help you target specific problems affecting your workforce. Your Account Manager can consult with you on programs and services available to address these concerns.

## Closed cases and referral recommendations

This report indicates referral options given after completion of EAP services. Issues may also be resolved solely by the EAP intervention.

XYZ Corporation				
Closed Case Assessment Profile				
Plan Year: 01/01/2015 - 12/31/2015				
Run Date: 01/01/2016				
Customer Total	Period		YTD	
	Number	Percentage	Number	Percentage
<b>Alcohol Problem</b>				
Alcohol Abuse	1	0.2%	3	0.2%
Alcohol Dependence	1	0.2%	12	0.6%
<b>Drug Problem</b>				
Drug Abuse	0	0.0%	0	0.0%
Drug Dependence	6	1.4%	12	0.6%
<b>Gambling</b>	0	0.0%	0	0.0%
<b>Relationships/Family/Marital/Child</b>				
Family Concerns	10	2.3%	79	4.0%
Marital/Partner	6	1.4%	94	4.7%
Child/Parenting	8	1.8%	38	1.9%
Childhood or Adolescence Disorder	5	1.1%	34	1.7%
Abuse; Sexual, Physical, Emotional	0	0.0%	3	0.2%
Other Relationship Disorders	0	0.0%	0	0.0%
<b>Emotional</b>				
Psychotic Disorder	0	0.0%	0	0.0%
Mood Disorder	82	18.6%	415	20.8%
Anxiety Disorder	28	6.4%	92	4.6%
Personality Disorder	3	0.7%	4	0.2%
Eating Disorder	1	0.2%	4	0.2%
Other Emotional Disorder	5	1.1%	17	0.9%
<b>Physical Health</b>				
Organic Mental Disorder	0	0.0%	3	0.2%
Other Physical Disorder	2	0.5%	7	0.4%
<b>Adjustment Disorders</b>	99	22.5%	348	17.4%
<b>Career / Job</b>	24	5.5%	119	6.0%
<b>Workplace Aggression</b>	0	0.0%	0	0.0%
<b>Sexual Disorders</b>	0	0.0%	1	0.1%
<b>Stress</b>	93	21.1%	450	22.5%
Suicidal / Homicidal	0	0.0%	0	0.0%
Deferred	9	2.0%	93	4.7%
Unidentified	23	5.2%	43	2.2%
Information Only	19	4.3%	62	3.1%
Management Consultation	15	3.4%	67	3.4%
	440	100.0%	2000	100.0%

XYZ Corporation				
Closed Cases and Referral Recommendations				
Plan Year: 01/01/2015 - 12/31/2015				
Run Date: 01/01/2016				
	Period		YTD	
	Number	Percentage	Number	Percentage
<b>Resolved by EAP</b>	<b>447</b>	<b>80.5%</b>	<b>1843</b>	<b>73.5%</b>
<b>Primary Referral Recommendations</b>				
Inpatient Mental Health	0	0.0%	3	0.1%
Inpatient Substance Abuse	1	0.2%	2	0.1%
Outpatient Mental Health	84	15.1%	545	21.7%
Outpatient Substance Abuse	1	0.2%	9	0.4%
Partial Hospitalization	0	0.0%	0	0.0%
Medical Referral	1	0.2%	3	0.1%
Unidentified	0	0.0%	0	0.0%
Self-Help Groups	0	0.0%	2	0.1%
Community Resources	3	0.5%	13	0.5%
Management Consultation	15	2.7%	77	3.1%
Client Dropped Out	3	0.5%	11	0.4%
<b>Total Assessed Closed Cases</b>	<b>555</b>	<b>100.0%</b>	<b>2508</b>	<b>100.0%</b>
<b>Resolved by Telephonic Consult</b>	<b>22</b>	<b>45.8%</b>	<b>123</b>	<b>63.1%</b>
<b>Primary Referral Recommendations</b>				
Referred to EAP Face to Face	26	54.2%	72	36.9%
Referred to Treatment	0	0.0%	0	0.0%
<b>Total Telephonically Closed Cases</b>	<b>48</b>	<b>100.0%</b>	<b>195</b>	<b>100.0%</b>
Assessed Closed Cases	555	57.63%	2508	66.6%
Assessment Did Not Occur *	360	37.38%	1061	28.2%
Telephonically Closed Cases	48	4.98%	195	5.2%
<b>Grand Total All Closed Cases</b>	<b>963</b>	<b>100.0%</b>	<b>3764</b>	<b>100.0%</b>

\* These cases are not included in the Resolved by EAP calculations.

## Online reporting

The online utilization report captures online session data from the time a user logs in at **CignaBehavioral.com** through when the user closes their browser window or leaves the site. The online hit/page hits are recorded each time a user moves from one distinct online page to another on **CignaBehavioral.com**. Online group usage captures page hits on a specific group of online pages with common themes.

Integrated and EAP customers' Monthly Overview of EAP services at the overall customer level includes a line for online sessions by month. This allows us to calculate an overall EAP presentation rate that includes the online sessions assigned to the customer.

# BILLING MATTERS

## Each month, Cigna will send you a self-billing worksheet

xxx.00

Page

1 of 1

Jane Smith  
1 Airline Drive  
Houston, TX 77001  
1.800.300.0000

Invoice #: 23050  
Invoice Date: 6/30/15  
Due Date: 8/01/15

1

Invoice reflects payments through 6/30/15

Month of Service	Invoice #	Division	Product	Description	# of Employees	Rate	Amount Due
2 06/15 07/15 08/15	23050		3 EAP SERVICES EAP SERVICES EAP SERVICES 5		4089.00 4089.00 4089.00	\$2.27 \$2.27 \$2.27	4 \$9,282.03 \$9,282.03 \$9,282.03
					TOTAL AMOUNT NOW DUE: 6		\$27,846.09

### Remit payment to: 7

Cigna  
P.O. Box 1450, NW 7307  
Minneapolis, MN 55485-7307

Please adjust “# of Employees” above for new hires and terminations and recalculate the “Amount Due.”

### Legend

- 1 The date payment is due. Late charges may be assessed if payments are received after this date.
- 2 The calendar month and date of coverage being billed.
- 3 Descriptions of the products selected are listed here. We normally print a standard description on each billing line, naming the product provided. If additional descriptions would make the bill clearer for you, we can enhance our standard billing line descriptions to accommodate your needs.
- 4 The amount due equals the per employee rate multiplied by the adjusted number of employees. You calculate the amount due for each product after your census adjustments.
- 5 From time to time, Cigna may need to notify you of adjustments to the billing for a previous month. In this case, we will add an adjustment line with an explanation to your next bill.
- 6 The total amount due to Cigna as calculated by you.
- 7 The remittance address for mailing your check and completed invoice.

# LEGAL MATTERS

This section is not intended as legal advice. Cigna's legal determinations are reached based on Cigna's business needs, and legal and regulatory obligations and limitations. Cigna recommends that your organization consult your own legal counsel for any specific regulations or legal questions you have regarding your business and your benefit programs.

## Legal agreements and other legal issues

It's important to stay informed on a variety of legal issues and government regulations that may affect your benefit programs. We'd like to share some basic information on the following.

### Employee Assistance Agreement

Before the effective date of your arrangement with Cigna, we send you a letter and a draft of the Agreement for Employee Assistance Program Services. While the final terms are being negotiated, this letter, with an attached Agreement, governs the rights and obligations of both Cigna and your organization until it's replaced by the final, fully-executed Agreement. Please contact your Account Manager with any questions regarding this letter and/or Agreement.

### Business Associate Agreement

Since Cigna is generally considered a business associate to our customers who are covered entities, we have prepared a Business Associate Agreement to formalize the relationship, as required by HIPAA. Provisions required by the HIPAA Security regulations have also been incorporated into the Cigna Business Associate Agreement. This agreement is included within your final contract. Note: See Appendix A for Authorization for Disclosure of Private Health Information form.

### Confidentiality agreements

Confidentiality agreements may be required for third party vendors for data extracts. Please contact your Account Manager should you require this type of detailed data.

**Cigna always recommends that your organization consult your internal legal counsel for any specific regulations or legal questions you have regarding your business and your benefit programs.**

# OPTIONAL SERVICES

At Cigna, we understand our customers have unique needs. To meet these unique needs, we have developed optional services to enhance your benefits program.

## Employee Assistance options

These optional EAP services, described below, are available at an additional cost. If you would like more information about any of these services, or if you are unsure if any of these services are included in your EAP, please contact your Account Manager.

- › Face-to-face Counseling
- › Work/Life Resources
- › Backup and Emergency Care (children and adults)
- › Concierge Services
- › Convenience Services
- › Enhanced Financial and Legal Services
- › CareKits: Educational Information Kits
- › Professional Coaching
- › Geriatric Case Management
- › Lactation Education and Support
- › Nanny Find Services
- › Adoption Service Subsidy Program
- › Mediation Services
- › International Assistance Program

Additional Assistance programs are also available for purchase. Cigna will tailor a program that meets your needs. Please contact your Account Manager for details.

- › Substance Abuse Professional (SAP)

### Behavioral Fitness for Duty/Risk Assessment

**Extended Follow up** Cigna has developed the systems and protocols necessary to support our customers' compliance with DOT regulations and employees requiring treatment as a result of corporate policy violations and Fitness for Duty evaluations. Our SAP network is available to effectively handle SAP referrals.

## Lifestyle Management programs

Cigna offers three Lifestyle Management programs built around online or phone communication sessions with a dedicated Wellness Coach. These programs are a good complement to your EAP.

- › Weight Management
- › Tobacco Cessation
- › Stress Management

## Behavioral Care options

### Care Advocacy

Cigna can provide your organization with integration of behavioral care services and EAP services, ensuring continuity of care for your employees and cost-effective use of your benefit dollars.

### Care Advocacy Program

Our integrated Care Advocacy Program supports all aspects of a customer's needs. It provides the clinical services they need and life event services to help alleviate their stress. We'll service your organization out of one office and one integrated EAP and behavioral health team. From the initial call, Cigna advocates for your employees on several levels (finding the right provider, appointment scheduling, educational information on their unique issues and coordination of care). We help ensure each customer gets the most effective care.

**AUTHORIZATION FOR  
DISCLOSURE OF PRIVATE  
HEALTH INFORMATION**

**APPENDIX A**

# AUTHORIZATION FOR DISCLOSURE OF PROTECTED HEALTH INFORMATION

I hereby authorize Cigna Behavioral Health,\* its agents or affiliates to disclose the protected health information (PHI) indicated below to the persons or entities specified on this form.

## Please note

This form is not required for all releases of your PHI. For example, this form may not be required to release information to:

- ▶ A spouse of a customer, when both are covered by the Cigna Behavioral Health Plan
- ▶ Parents of minors or other dependents
- ▶ Personal representative on file with Cigna Behavioral Health

We will disclose certain PHI about you to these persons at their request if they successfully complete a caller verification process.

**Sections 1 through 6 must be completed for this authorization to be valid** (Please print your responses on this form)

**Incomplete forms will not be processed, and will be returned to the requestor for additional information.**

## 1. Verification

**Identification of customer:** (The following information is needed for verification.)

Name of customer whose information will be disclosed: \_\_\_\_\_

Date of birth: \_\_\_\_\_

Customer address: \_\_\_\_\_

Phone number where we can reach you if we need to contact you to process your request (required): \_\_\_\_\_

Social Security # (Optional): \_\_\_\_\_ Customer ID card # (if applicable): \_\_\_\_\_

Group or account # on ID card: \_\_\_\_\_

Subscriber name (if different from Customer): \_\_\_\_\_

Subscriber's relationship to customer: \_\_\_\_\_ Subscriber's employer name: \_\_\_\_\_

Subscriber's Social Security # (if different from customer) (Optional): \_\_\_\_\_

**If you have additional coverage with Cigna, other than that which is described above, please provide the following information as well:**

Other employer name: \_\_\_\_\_

Customer ID card #: \_\_\_\_\_ Group or account # on ID card: \_\_\_\_\_

Does this request apply to all coverage?  Yes  No

**Together, all the way.®**





## 2. Description of information to be released

Please indicate what information you wish to release by checking one or more of the boxes below. If you wish to grant limited access (i.e., specific dates of service, specific case management issues, etc.), please specify that in the space provided.

- Claims:** \_\_\_\_\_
- Eligibility/Benefits:** \_\_\_\_\_
- Medical Records:** \_\_\_\_\_
- Case Management:** \_\_\_\_\_
- Other:** \_\_\_\_\_

Unless otherwise indicated, my authorization includes the release of the following: (Please strike through those you wish to exclude, if any.)

- ▶ Diagnosis and/or treatment for alcoholism and/or drug abuse or dependency
- ▶ Diagnosis and/or treatment of mental illness
- ▶ HIV antibody test results and/or AIDS diagnosis and treatment
- ▶ Genetic testing information

**Arizona residents** – The information authorized for release may include records concerning a communicable or venereal disease, which may include, but are not limited to, diseases such as hepatitis, syphilis, gonorrhea and HIV/AIDS. You may have additional protections under Arizona Revised Statutes 36-664 if this type of information is to be released.

**Oklahoma residents** – The information authorized for release may include records concerning a communicable or venereal disease, which may include, but are not limited to, diseases such as hepatitis, syphilis, gonorrhea and HIV/AIDS. You may have additional protections under Section 1-502.2 of the Oklahoma Statutes if this type of information is to be released.

## 3. Entity or person authorized to receive information

**Name:** \_\_\_\_\_ **Company** (if applicable): \_\_\_\_\_

**Address of individual or company authorized to receive the information:** \_\_\_\_\_

**Virginia residents** – A copy of this authorization and a notation concerning the persons or agencies to whom disclosure was made shall be included with your original health records.

## 4. Purpose of this release of information

- At the request of the individual** \_\_\_\_\_
- Other** (please describe) \_\_\_\_\_

## 5. Expiration of authorization

**This authorization expires:** \_\_\_\_\_ **(date).**

If you state an event rather than a specific date, it will be necessary for you to submit a revocation form when the event occurs.

If the expiration date is omitted from this form, your authorization will expire after one year and a new authorization will need to be submitted at that time.

Note for customers in the following states: If you live in **Arizona, California, Georgia, Illinois, Massachusetts, Montana or Minnesota**, your authorization will be valid for no more than one year. Authorizations signed by **Virginia** residents will be valid for no more than two years. Customers living in those states who seek to authorize disclosure of their personal information for a longer period will have to submit a new authorization at the time that this authorization expires.

### Please note

- ▶ Information disclosed based on this authorization may be subject to redisclosure by the recipient and may no longer be protected by federal privacy regulations.
- ▶ If the information on this form is not complete, Cigna Behavioral Health will return the form to you, and this request will not be considered until Cigna Behavioral Health receives complete information.
- ▶ If any of your personal information has changed, this form will no longer be valid and a new form will need to be completed.
- ▶ If either the customer or group changes to a different type of health care benefits coverage provided by Cigna Behavioral Health, another form will need to be completed at that time.
- ▶ If the release is for HIV-related, alcohol or drug treatment, or mental health treatment information, the recipient is prohibited from redisclosing such information without the individual's permission unless otherwise permitted to do so under federal or state law and any unauthorized further disclosure in violation of state law or federal law may result in a fine or jail sentence or both.
- ▶ You may change or revoke this request at any time by sending a written request to Cigna Behavioral Health, Central HIPAA Unit, at the address below. You can obtain a Change/Revoke form by calling Cigna Behavioral Health Customer Service at **800.926.2273**.
- ▶ Consent is subject to revocation at any time except to the extent that the program or person which is to make the disclosure has already acted in reliance on it.
- ▶ The provision of treatment, payment enrollment or eligibility for benefits does not depend on whether you sign this authorization.

**I understand that signing this authorization is voluntary. I have read and understand the above information. My signature authorizes the disclosure of the information described.**

### 6. Signature of customer, personal representative, parent/guardian who is authorizing the release:

\_\_\_\_\_ Date: \_\_\_\_\_

**Relationship if the person signing is other than customer whose information is to be used and disclosed:** \_\_\_\_\_

- ▶ If this request is made by a personal representative, we will require verification of the authority of that personal representative before this request will be considered complete.
- ▶ If request is made by a parent/guardian, please complete the following: Customer is a minor, \_\_\_\_\_ years old. If you are making this request on behalf of a minor child, we may require additional information before this request is considered complete.

**We recommend that you keep a copy of your completed form for your records. A copy will be retained by Cigna Behavioral Health and made available at your request.**

## To return your completed form

**Fax to:** 952.996.2507

or

**Mail to:** Cigna Behavioral Health  
Central HIPAA Unit  
11095 Viking Drive #350  
Eden Prairie, MN 55344

**Sections 1 through 6 must be completed for this authorization to be valid.**

**Incomplete forms will not be processed, and will be returned to the requestor for additional information.**

\* "Cigna Behavioral Health" refers to Cigna Behavioral Health, Inc. and subsidiaries of Cigna Behavioral Health, Inc., including Cigna Behavioral Health of California, Inc., and Cigna Behavioral Health of Texas.



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