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How to Engage Your EAP (Advanced AF)

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EAP 101 (not advanced)

Your EAP is contracted to do some combination of the following, 85% of which is mental health/addiction

- Telephonic/virtual crisis intervention
- In person critical response
- Assess needs and coordinate solutions
- Train staff

What We Discovered

We began including the EAP's contracted with locals within our SMART MAP trainings, what we discovered was frustrating:

- Legacy contracts that had not been scrutinized
- Contact phone numbers ringing without answer or voicemail
- Calls returned days later
- 'Crisis' lines that were 9-5 M-F
- Uneducated and poorly trained people directing care
- Focus on immediate bottom line rather than member health
- Funds being diverted to the EAP upon referral of members
- Additional costs for most services
- A general lack of respect for our members



What We Did

- We had an EAP assessment tool built and put them to the test
- Reviewed contracts and brought accountability
- The majority of our locals fired their EAP's
- Built a subsidy plan for locals unable to upgrade
- Demanded that EAP's begin increasing engagement and transparency
- The International passed a resolution requiring that EAP's be 'value based'

Value Based EAP

We identified the following criteria as mandatory for any EAP provider we contract with:

- Telephonic/virtual crisis intervention
- Individual care
- In-person critical response
- Assess needs and coordinate solutions
- Train staff
- Include member family services
- Increasing utilization rates
- 24/7/365 access
- Separation of punitive response
- Up-to-date list of vetted providers
- No referral fees

Union EAP Commitments

- Hire and train only qualified mental health professionals
- Committed to the primary KPI being increased utilization
- Single point of qualified contact for each case
- Work with members insurance to develop a comprehensive plan and drive network access
- Separated divisions to isolate punitive cases

The Value Proposition

A Higher PMPM for Better Services

- This level of care requires a larger and more specialized workforce, we pay for their expertise.
- The true ROI is realized with a healthier workforce who in turn contribute more to the Union because we keep them on or get them back to the job.
- Cut-rate EAP's cost unions money. They don't charge enough to provide the services they represent so corners are cut and members suffer.