Providers Guide

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UTEAP.ProviderRelations@uth.tmc.edu

The UTEAP Provider Guide outlines the process of serving UTEAP clients – from the referral process, assessment & confidentiality, case referral for ongoing care, to documentation and billing. If you have a question about the following UTEAP processes, documentation or standards of service, please contact us at (713) 500-3327 or (800) 346-3549.

THE UTEAP REFERRAL PROCESS

The client contacts UTEAP to utilize services. Once our UTEAP staff gathers initial demographic and related information, the client will be sent a list of Network Providers that may meet their specific needs within a 10 +/- mile radius. The Client is instructed to review the list and contact any or all of the providers on the list to ascertain their availability and identify that they are using their EAP benefits. There may be certain instances when a client is referred to a particular provider by our Clinical staff. In these instances, the Clinical staff will contact the specific provider directly to discuss and confirm availability.

HOW ARE SESSIONS AUTHORIZED BY UTEAP?

After selecting a provider and scheduling an appointment, the client is instructed to call the UTEAP intake support staff to notify us of the provider they've chosen. The authorization of services form will be faxed/emailed to the providers' office prior to the 1st appointment and will include the number of sessions that will be covered.

WHAT IF A CLIENT CALLS WITHOUT CONTACTING UTEAP FIRST?

There may be situations when an EAP client contacts you directly for an appointment as a result of knowing that you are an UTEAP Network Provider. If this happens, please have the employee contact UTEAP to verify eligibility for services through the EAP. The EAP will then send you the Authorization paperwork for the client.

REQUIRED FORMS AND PAYMENT PROCESS

The EAP Authorization forms are the primary documents you will complete when serving UTEAP clients. As a Network Provider for UTEAP, you cannot bill employers (client companies), clients or the client's health care insurance company or "balance bill" for any EAP services that you provide. Please submit all payment requests for authorized services to UTEAP on the appropriate EAP forms provided.

UTEAP CONTACT:

Fax Billing Forms to: 713 500-3330

If you need further assistance, please contact the Provider Relations Department at 713 500-3327.

Send updated information or requests to:
UTEAP
Attn: Provider Relations
7000 Fannin, UCT 1670
Houston, TX 77030
Ph: 713 500-3327
Fax: 713 500-3330

HOW DO I SUBMIT BILLING FORMS FOR PAYMENT?

Upon completion of EAP assessment services, you will only be expected to complete the Client Record and Billing Form. The form serves the dual purpose of clinical documentation of the case and billing for your services. No other billing form is required. The Client Record portion of the form asks you to record the client's diagnosis, treatment plan and disposition, along with brief demographic information. The Case Record is then forwarded to UTEAP for case closure and payment of your services. Once the Case Record is received by UTEAP, you can expect to receive payment within a maximum of four weeks. After submission of the paperwork, the case will be closed. We will not pay for additional sessions under this authorization once you submit your paperwork.

The EAP Client Record and Invoice forms are sent to you on the day of Authorization and are the primary documents you will complete when serving UTEAP clients. Please submit the Client Record and Invoice **AFTER** your last session with the client. All documents must be submitted to ensure payment in a timely manner.
Fax billing forms to 713 500-3330.

Please be advised under the terms of the Provider Agreement with UTEAP, your reimbursement rate will be decreased as follows if there is a delay in returning the assessment/invoice forms:

- More than 60 days after the last session – 25% penalty
- More than 90 days after the last session – 50% penalty

WHAT IF THE CLIENT DOES NOT COMPLETE ALL SESSIONS?

If the client does not return after 30 days of the last session, then notify us that you will be closing the case with additional sessions not used under the authorization. Once you submit the paperwork to us, the client will need to call and open a new case to utilize remaining sessions. We will not pay for additional sessions under this authorization once you submit your paperwork.

MISSED APPOINTMENTS

UTEAP will not be responsible for compensating Provider for missed or cancelled appointments, telephone consultation or time spent on case management.

SELF-REFERRAL AND CONTINUATION OF CARE

Should ongoing care be needed, you will discuss options for that care with the client. This is normally done at some point during your last visit with the client. You will be expected to provide the client with a list of at least three qualified providers within the community for ongoing treatment. You may list yourself as the 1st referral source along with two other referral options should the client wish to continue treatment with you. If you are qualified to assist the individual and if the client chooses to continue working with you, you are welcome to accept the individual or family into your practice. Our expectation would be that you are a provider for the individuals Health Benefit if the condition is covered under their insurance.

AUTHORIZATION EXPIRATION

Authorization for services are issued on the day the client informs UTEAP that they have made an appointment with a Network Provider. The Authorizations for sessions expire 90 days after issuance.

REQUESTING ADDITIONAL SESSIONS OR EXTENSION OF EXPIRATION DATE

If there is a clinical need for additional sessions or if the Authorization will expire before your last session with the client, please call 713 500-3327 or 800 346-3549 to consult with a clinician. We will evaluate on a case by case basis.

THREAT OF VIOLENCE OR RISK

Should you as our Network Provider determine that an EAP client poses a “threat of harm to self or others,” the provider should contact UTEAP as well as other individuals or authorities with a direct or implied safety interest. This includes (but is not limited to) the police, the Designated Mental Health Professional within your community, the person toward whom a threat has been made, the client’s family, etc. Under these circumstances, the provider’s role is to avert the potential for harm and – to the extent possible - ensure public safety. Should the provider determine that there are indications of current or previous child or elder abuse they are to report these incidents to the proper authorities as required by state law and their license requirements. In these instances, the provider will also advise UTEAP of the report and actions taken related to the situation.