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# *the* **ALMACAN** ©

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An International Association of Professionals in Employee Assistance Programs

## **PPOs and the Spectrum of Treatment**



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**What PPOs are ♦ How they've changed  
How they work with EAPs ♦ Where they  
fit into the evolution of health care**

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# Federal anti-drug regulations favor EAPs for drug/alcohol education and training.

## What is the best reference information on the subject?



## The ALMACA 3-pak.

The federal government has helped to make employee assistance programs a key player in the crusade against drugs in the workplace with the passage of the Anti-Drug Abuse Act and issuance of regulations by the Department of Transportation and other federal agencies. EAPs have been deemed expert in the provision drug and alcohol services to employees of federal government contractors and grantees, as well as to industries that must comply with drug-free workplace provisions.

ALMACA's 3-pak provides comprehensive information on EAP consulting sources and EAP implementation that you, as an EAP professional, can use for your own benefit or to share with prospective clients.

**The ALMACA Directory of EAP Consultants.** A virtual "Who's Who" of EAP consulting specialists, this publication tells you where they are located and what their specialty areas are.

**NIDA Guidelines for the Development and Assessment of a Comprehensive Federal Employee Assistance Program.** Published by the National Institute on Drug Abuse, these guidelines provide recommendations on EAP design and implementation, program operations, evaluation and workplace integration. A monitoring instrument provides help in auditing existing policies and procedures.

This publication has been made available to ALMACA by NIDA for distribution.

**The ALMACA Continuum of Services: Alcohol and Drug Abuse in the Workplace.** This ALMACA publication recommends a specific procedure for addressing alcohol and drug abuse in the workplace. Included are process maps which analyze possible strategies and the efficacy of various forms of drug testing.



If you buy our 3-pak, we will include a portfolio of the provisions of the Anti-Drug Abuse Act that apply to EAPs, as well as relevant information from regulations that either mandate or recommend EAPs for particular industries.

Our charge for the entire package is \$30 for members and \$50 for nonmembers. It's a small investment that can help you reap big rewards.

**Yes**, I would like \_\_\_\_\_ copies of the 3-pak. I \_\_\_\_\_ am \_\_\_\_\_ am not a member of ALMACA. Enclosed is a check for \$ \_\_\_\_\_. (Virginia residents: include 4% sales tax)

**Send the materials to:**

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# An Emphasis on the *Real* Issues Confronting EAPs

Much of the contemporary EAP literature makes for "polite" reading, but it often misses the meat-and-potatoes subject matter as to what dictates the direction of the EAP practice. In March, April and May, *THE ALMACAN* will look down the barrel at some of these impact issues.

Actually, the proceedings of a recent Employee Assistance Roundtable meeting, published on pages 41-49 of the January issue, provided a foundation for exploring the topics in more depth. If you haven't already, be sure to give the Roundtable report a good once-over.

This, the March issue, features a circumspective account of the PPO field's development and that portion—the mental-health specialty—which abuts EAPs. The field has evolved in such a way that some PPOs are practically indistinguishable from managed health care firms. The articles on PPOs herein explain the differences.

April will look at the relationship between EAPs and benefits departments. Is the portrayal of EAP professionals as the freest spender of corporate health dollars an accurate one? Are benefits managers really the cold-blooded wardens of the corporate health-care

money vault that they may appear to be? Of course, the answer to both stereotypes is "no." In fact, they share many of the same interests. Now more than ever, EAP professionals need to establish alliances with benefits managers, and this issue will look at how the two camps should get along.

May will examine the competitive state of the EAP contracting field, circa 1989. Not only are EAP providers competing amongst themselves, the Drug-Free Workplace Act may very well be a magnet for other service providers who claim to be able to bring employers into compliance with the new law. This issue will provide an investigative report.

EAP professionals already know how to help save lives and restore worker productivity. The intent of the next few issues is to provide information that will help you to continue doing your good work.

*Rudy M. Yandrick*

**RUDY M. YANDRICK**  
EDITOR

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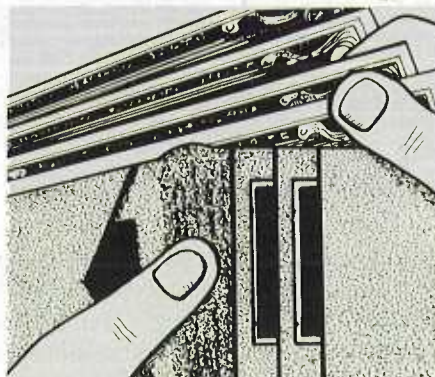
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## FROM THE EXECUTIVE DIRECTOR

*Thomas G. Delaney*

**A**LMACA moved into its new offices on February 1st. We are still headquartered in Arlington, Virginia and on the Orange Line of metropolitan Washington, D.C.'s subway line. So we continue to have easy access to Capitol Hill, governmental agencies and businesses.

In one way, it does not signify much of a change, but I do think that it is significant in other ways. The offices had been on North Kent Street for almost 10 years, so the fact that a short move was handled as an administrative routine is evidence of the maturity of ALMACA. We have been able to continue the flow of business and focus on the important issues facing the EAP field.

There are several events that occurred at about the time of the move which both illustrate the continuing priorities of EAPs and the important concerns facing us. I made two trips then, one to New London, New Hampshire to attend the memorial services for Dr. John Norris, and the other to Arizona, to participate in a discussion with the Commission on the Accreditation of Rehabilitation Facilities (CARF).

### "DR. JACK"

Dr. Norris, known as "Dr. Jack" to many, was responsible for the pioneering and success of occupational alcoholism programs through his positions of medical director and assistant medical director of Eastman Kodak Company, and as chairman of the board for Alcoholics Anonymous. As such, he is an important link between the beginnings of our field and the current EAP state of the art. [See the "In Memoriam" column on page 21.]

While recalling his outstanding work during the services, I was reminded of two questions that I am often asked.

"Do EAPs still pay attention to drug and alcoholism problems, or have they lost their focus on this and attempt to deal with all emotional and social-service problems which appear in the

workplace?"

"Does ALMACA represent the EAP field, since the name reflects its roots—that of occupational alcoholism?"

The one almost answers the other! However, the extremes of our field do give rise to both concerns. There certainly are EAPs that identify smaller numbers of workers with drug and alcoholism problems than incidence and prevalence studies suggest exist among the population of troubled employees. These are just a few programs, but as long as they exist, they represent a challenge to the EAP field.

The ALMACA Employee Assistance Certification Commission (EACC) has been helping to solve this problem by requiring that CEAPs demonstrate knowledge in relation to alcoholism and drug addictions and stay current in this area in order to maintain their certifications. The ALMACA Program Standards Committee is also addressing the issue as chairperson Debra Reynolds leads it in developing new EAP standards.

A word of warning—beware of leg-

islation that purports to "solve" this problem. For better or worse, the vested interests in the individual health-care professions usually have more power in the state legislatures than cross-discipline fields like our own. Right now, in Congress, there is a proposal to recognize "mental health professionals" as appropriate EAP staff. This has apparently stemmed from vested interests in the social work field. Although I regard myself as a loyal professional social worker, I think that workers are better served by EAP professionals who have a broader disciplinary background and the CEAP designation.

In regard to ALMACA's representation in the EAP field, this question always surfaces from outside of the field. Over the 18-year history of ALMACA, the EAP field has embraced ALMACA as its membership organization. We all know that, from time to time, there have been groups that have been unhappy with ALMACA in one respect or another, and they have formed other groups. These people usually maintain

## ALMACA Receives a \$10,000 Grant from Ford

**I**n January, midway through the 1988-89 "LEAP Into the Future... The ALMACA Campaign" fund-raising season, a \$10,000 grant from the Ford Motor Company Fund has brought total contributions to \$80,000. The donation has enabled "LEAP" to surpass the halfway point toward our \$150,000 goal!

With this major grant, the Campaign Steering Committee, chaired by Gary L. Atkins, Donald B. Levitt and James R. O'Hair, is confident that the \$70,000 balance can be raised by June 30—the last day of the campaign.

This is the third grant of \$10,000 that ALMACA has received from the Ford Motor Company Fund. The

accompanying letter from E.J. Savoie, director of the Employee Development Office, and J.H. Triebwasser, M.D., medical director, Occupational Health and Safety, stated:

*"This contribution recognizes ALMACA's value to our employee assistance activities. It also conveys our continued support for ALMACA's effort with other business, government, labor and community groups involved in helping people deal more effectively with alcohol, drug abuse and other serious personal problems."*

ALMACA extends its sincere thanks to Ford for its kind words and financial support.