

THE ALMACAN

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3rd-Party Coverage of Alcoholism Jeopardized

Elimination of the alcoholism treatment benefit under the largest health plan for federal workers sent shock waves throughout the alcoholism community, generating concern that the move could signal more widespread slippage on the third-party payment front.

The inpatient treatment benefit under the Blue Cross/Blue Shield Service Benefit Plan, which embraces some 1.9 million federal employees—about half the workforce—was eliminated as of January 1 as part of a wide sweep of benefit reductions and rate

hikes initiated by the Office of Personnel Management (OPM). OPM director Donald Devine said the cutbacks were needed “to prevent huge rate increases resulting from inflation in medical care costs and unusually large increases in health services utilization.”

Constituency interests, working through the NIAAA Advisory Council and Congress, had won the inpatient coverage for alcoholism treatment, which provided for 28 days of care in a hospital or free-standing program, during the negotiations for the 1981

benefits in the fall of 1980. It was a development hailed as a major breakthrough.

Inpatient coverage for alcoholism under the Blue Cross/Blue Shield federal plan reverts back to the pre-1981 benefits, which were generally limited to 5-to-7 day detoxification period.

Outpatient alcoholism benefits—which for the most part have been confined to services rendered in a psychiatric setting—are also sharply curtailed under the scaled-down mental health coverage. Previously unlimited, mental health outpatient visits are tossed into a general pool with all other physician home and office visits, including nonemergency hospital outpatient visits and home nursing visits, with an overall limit of 50 visits per year for high option, and 24 a year for low.

Blue Cross/Blue Shield initiated the specific elimination of the alcoholism treatment benefit in response to the general OPM directive to curtail coverage, according to a Blue Cross/Blue Shield official involved in the negotiations. He told the *ALMACAN* that “essentially what we tried to do in all cases was to make benefit reductions in areas that would strike the least number of our subscribers.” The official said that compared with hospital and surgical benefits, few used mental health and alcoholism benefits, although he conceded that with the alcoholism benefit in effect

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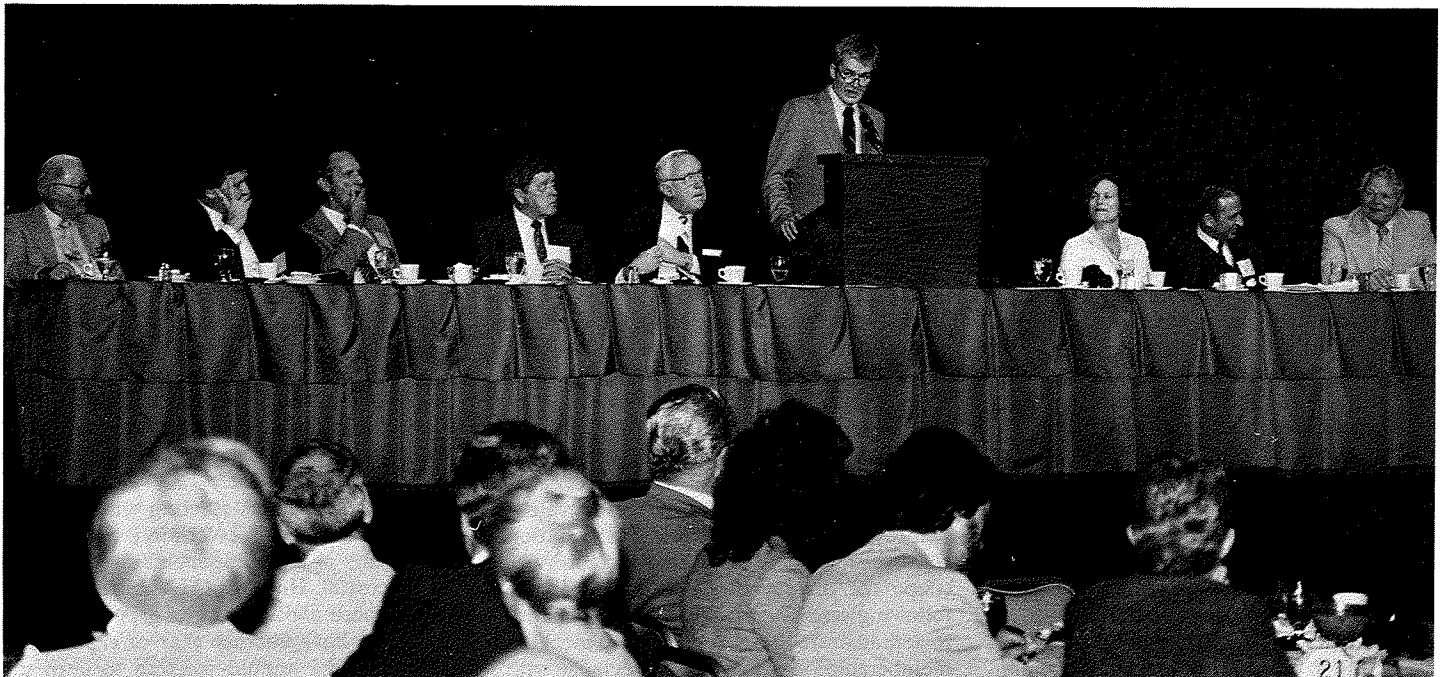
Employee Counseling Services Model Debuts in HHS Region V

Federal agencies are required by law to implement appropriate prevention, treatment, and rehabilitation services for drug abuse (PL 92-255) and alcohol abuse (PL 91-616) among federal civilian employees. The ECS program in the Department of Health and Human Services is currently developing a number of demonstration projects and model programs that will provide data useful to other federal agencies in fulfilling the legislative mandates.

The office of Employee Counseling Serv-

ices, (ECS), assistant secretary for personnel's office, is pleased to announce the beginning of one of its model ECS programs in Region V, Chicago. An 18-month demonstration project began on October 1, 1981. The project is designed to strengthen the ongoing ECS program in Region V, particularly in developing new approaches to assisting HHS employees with legal and illegal drug-related problems. The results of the project, including data and recom-

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ALMACA President Ed Small speaks to the 10th Annual Meeting group that attended the President's Luncheon during the San Diego conclave. Sharing the head table with Small are former presidents of ALMACA. For more 10th Annual Meeting photographs, see page 5.

President's Comment

By Ed Small
ALMACA President

It is 1982 and ALMACA is in an interesting position as the voice of occupational programs. The title "employee assistance" is being adopted and stretched to cover an enormous variety of activities inside the world of work; people from assorted backgrounds are rushing headlong into our field in hope of employment; alcoholism as a disease is again under attack in attempts by the *arrivistes* to relegate it back to being a symptom and dub it an old fashioned word. And minority groups are trying to find a new voice for the 1980s.

This new voice of the minorities has been on my mind since becoming president of ALMACA. I am keenly aware of the fact that everyone is probably in a minority at times and I honestly believe that most of us are not against minority groups of any kind. What upset most people in the 1960s was the repetition of the demands of groups within society. Liberation, civil rights, and equal representation were a bore until they became issues for your group.

As a group, organized labor has the most extensive experience with the rise and fall of the popularity of their efforts to insure dignity for their members, since they have been working at this for over a century. Lots of citizens in our pluralistic society imitated some of their methods in the '60s and '70s and one of the most successful was that minority representing that part of the world's population that calls itself women.

Women represent a large portion of our members. Dr. Dale Masi was the first woman on our national board. We now have five, including two elected to our national executive committee. Things change slowly, but I believe that what groups felt compelled to demand before, can now be accomplished with simple discussion. Many elected chapter presidents are women. I am never asked anymore if I think a woman can administer a program and, honestly, I was asked that a lot in the old days.

Nowadays women have asked within our association that they be acknowledged for their professional accomplishments and not their sex. I know many women enjoy being treated nicely, but what some have asked is that professional accomplishment be highlighted. This is a reasonable request expressed in a reasonable voice.

The new voices for the '80s must represent the needs of emerging people. We will have labor, women, professionals, students, blacks, and anyone else who qualifies as an administrator or consultant in our profession. It is not our role to force any of these people to join ALMACA but when they show up in our ranks, we can make sure our colleagues feel they are welcome.

I welcomed Dale Masi at a meeting recently emphasizing her being a woman more than as a doctor. I must say

she handled it extremely well. It did rankle some people in the room. I apologized but I don't believe members should leave our meetings feeling slighted if it is possible to avoid saying something offensive.

I don't think we will offend as we move on in this decade and continue to try and find our new voice. A sorting out is taking place. The old issues are not dead but slumbering until leaders define them in a style acceptable to the people they would serve. Language changes and the message of public figures must change or people will yawn and stop listening. If nobody listens it becomes difficult to deliver a message.

And the message many women and labor people have given me is that they are more content within ALMACA. They say that we are not perfect but we have made progress. Will we ever become perfect in the eyes of 2,800 members? Hell, no!! But we can have fun trying. □



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Executive Director's Comment

By Tom Delaney
ALMACA Executive Director

Within a few days of the printing of this issue, associate director Judith Evans and I will meet with Ed Small and Jim Murphy to discuss the program for the 1982 ALMACA annual meeting, which will be held in Philadelphia, PA, next November 2 through November 5. Jim Murphy is director of the Commerce and Industrial Program of the Greater Baltimore Committee. He is program chairman for the 1982 annual meeting.

I want to personally urge all ALMACANS to communicate to me their suggestions for the next annual meeting. Although it may seem like a long way off, now is the time for decisions that shape the annual meeting. As the year rolls on, certain decisions narrow the options available for later decisions. Now is also the time when the previous annual meeting is fresh in the minds of those who attended. If there was something at the 1981 meeting that you would like changed, or something that you thought was missing, let us know.

It seems to me that the annual meeting is one of the major projects that the national office undertakes for the membership. It is an opportunity for the field to exchange information with programs and individuals; an opportunity to learn at mini-courses; members can strengthen existing networks and develop new ones; research and evaluation results and other technical information can be exchanged; it is an opportunity to shape the direction of ALMACA for the following year; the exhibitors have a chance to demonstrate their programs and meet the membership; it is a chance to socialize with old friends from throughout the field and

make new friends; and it is an opportunity for related organizations, such as the Occupational Program Consultants Association, to have meetings.

The program committee will be issuing a call for papers next month. In addition to submitting suggestions to us about the format and content of all aspects of the meeting, I hope that you will carefully consider responding to the call for papers. Since the goal of the workshops is to provide information to the membership, I hope people will be willing to share their experiences with others. It's good for the field when some of the "old-timers" are willing to share their experiences.

Every other year, ALMACA elects new national officers and 1982 is such a year. The new officers will be installed at the annual meeting. One way for the membership to demonstrate its support for the new officers would be with maximum participation in the 1982 annual meeting. We are open to suggestions about how the staff and officers should participate in the program. The meal functions have followed a traditional format. While our experience of last year suggests that the menu should be even more traditional, the format is not cast in concrete. What kinds of plenary speakers would you like to hear?

The 1981 annual meeting was an outstanding success. We certainly want to retain many of the components that made it so successful. However, ALMACA will have experienced another year of growth and the field will have another year of experience. We want the annual meeting to keep up with those changes and look for your help. □

New York State Announces Expansion of EAP Services

Gov. Hugh L. Carey has announced the development of a labor-management supported employee assistance program to help state employees suffering from alcoholism and alcohol abuse.

Speaking in New York City to corporate and labor leaders at the annual dinner of the New York City Affiliate and the National Council on Alcoholism, the governor challenged those leaders to implement employee assistance programs to identify troubled employees whose job performance and productivity have diminished and send them for help. Frequently, alcoholism and alcohol abuse are the underlying causes of job problems.

Governor Carey said he signed the executive order to establish an employee assistance program task force that will recommend a program for all of the state work force. "I am convinced not only that employee assistance programs work, but that they are good business," the Governor said. The Civil Service Employees Association, Public Employees Federation, Council 82-AFSCME, Department of Corrections, and Department of Transportation are presently providing EAP services that have demonstrated the need for the expansion of EAP to all governmental workers.

In New York State only 12 percent of the

total work force including state government employees has access to employee assistance programs, the governor said.

The governor argued that employee assistance programs have a record of producing as high as 70 percent recovery rates for alcoholic workers who use the services. He added that research has shown that the programs are cost-effective, returning four dollars for every dollar invested in helping the alcoholic worker.

According to the governor, employee assistance programs can improve productivity, help troubled employees and their families, save health dollars because of the early intervention, and lessen the stigma associated with alcoholism as a health problem.

The task force Governor Carey created in the executive order is being chaired by Dr. Sheila Blume, director of the State Division of Alcoholism and Alcohol Abuse, and will include the director of the Office of Employee Relations, presidents of the public service employee unions, and experts in the field.

In his remarks, Governor Carey emphasized the need for the corporate-private sector to work cooperatively with government to solve the state's number one public health problem — alcoholism. □

Eastern ALMACA Conference Scheduled For Cape Cod

The ALMACA Eastern Region is planning the Fourth Annual Eastern Regional Conference to be held at the Sheraton Regal Inn in Hyannis, Massachusetts on Cape Cod. The conference dates are June 13-16, 1982, and the Theme is "It's Up to Us."

The conference chairman is the president of the Boston ALMACA chapter, Jack Connors of the New England Gas and Electric Association. The program chairman is Austin Gibbons of the Massachusetts Department of Public Works, and the chairman of the exhibits committee is Jim Edwards of Seabrook House in New Jersey.

The conference will have a labor booth, as a special feature. The development of this exhibit is under the direction of Carmine Guastella of the National Maritime Union. Carmine has issued a special invitation for all persons involved in union-based programs to provide him with material for the exhibit. People who have material for the labor booth at the Eastern Regional Conference should contact Carmine Guastella at the National Maritime Union, Pension and Welfare Plan, 346 West 17th Street, New York, NY 10011. □

Worksite Logical Setting For Prevention

HHS Secretary Richard Schweiker recently referred to the worksite as "the most logical setting for the kind of preventive health care efforts that will reduce health care cost." Addressing 250 health professionals and industry and labor leaders at an Alcohol, Drug Abuse, and Mental Health Administration (ADAMHA) conference on health promotion at the worksite Schweiker said, "Your interest . . . puts all of you at the forefront of the nation's most important public health movement: educating Americans about how they can stop illness before it strikes."

Schweiker praised what he described as an encouraging trend on the part of employers to reduce lost productivity by starting company-sponsored programs to deal with employee health problems, and he offered the following examples:

- New York telephone reported a 45 percent drop in absenteeism due to high blood pressure after a worksite hypertension program was started two years ago.
- General Motors reported a 49 percent reduction in lost work hours and a 29 percent reduction in disability costs as a result of its alcoholism program.
- Kimberly-Clark reported a 70 percent reduction in accidents due to an employee assistance program on alcoholism and mental health.
- The New York Board of Education

reported a 55 percent drop in sick leave among participants in a physical fitness program.

Referring to the need to expand prevention activities aimed at alcoholism, the Secretary gave the following statistics:

- Three times more sickness and accident benefits are paid to employees who have problems with alcohol.
- Lost productivity from alcohol abuse is estimated at \$12.5 billion a year.
- Alcohol abuse and smoking together account for more than \$60 billion a year in health costs, lost earnings, absenteeism, and accidents.

The Secretary spoke of budget allocations to lay the groundwork for prevention training for students in the nation's medical schools and other health professions. He said that "any attempt to change direction from sick care to true health care must include training physicians in prevention."

These and a host of other occupational stresses—including poor working conditions (bad lighting, excessive noise) and conflicts with supervisors—can trigger emotional distress or lead to substance abuse. Since "no worker is an island," as Glasser put it, employees' problems become their families' problems.

For this reason, he noted, many successful worksite programs are open to workers and their families, and a few offer services to the community-at-large. □

ALMACANOTES

The San Fernando Valley Chapter of ALMACA has joined the ranks of sanctioned chapters across the nation.

Charles K. (Jack) Rose, EAP administrator for the Lockheed-California Company, is chapter president and would like to give special recognition to the ad hoc committee for the superb foundation they laid in getting this chapter off the ground, as well as the work and dedication they continue to display. They are: Wayne Gradwohl, West Coast EAP administrator for Anheuser Busch; Jack Petersen, EAP administrator for United Firefighters, Local 112; Red Roe, EAP coordinator, NABET, Local 33, and Paul Sanchez, EAP, Pathfinders Foundation.

The Chapter officers, in addition to Rose, are Sue Fedan, vice president, Lisa Rhinehart, secretary, and Jack Petersen, treasurer.

According to Rose, the chapter has grown to include over 40 paid members. He also stated that the chapter would especially like to thank national ALMACA for its cooperation and support in making this a sanctioned chapter. He invites any and all who are in the San Fernando Area to attend the chapter meetings, which are held the third Tuesday of each month at noon in the Sportsman's Lodge in Studio City, California. □

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only since January, 1981, "our data was not really that pronounced."

The benefit reductions and rate increases were announced by OPM on New Year's Eve following an initial series of unsuccessful court challenges by numerous federal union and health provider groups. There were many suits still pending, however, and preparations were being made for a possible legal action by alcoholism providers. The National Association of Alcoholism Treatment Programs gave the go-ahead to a Washington law firm to explore court remedies, and other field groups, including ALMACA, were looking into the possibility of joining any future legal action.

Constituency reaction was vocal. James S. Kemper, Jr., chairman of the board of the Kemper Group, urged OPM director Devine to reinstate the alcoholism benefit, declaring that the decision to drop it "comes at a time when not only the consequences of the illness of alcoholism, but also the cost benefits of its effective treatment are being widely recognized." Kemper, a long-time board member of the National Council on Alcoholism, added:

"By eliminating the alcoholism treatment from the federal employee health benefit package, you will not only discourage early recognition of the illness in affected individuals, decreasing their productivity and imperiling their health and lives, but you will also continue to pay for costly

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recommendations, will be made available to other federal agencies and to professionals in the employee counseling field.

Special features of the project include:

- The testing and demonstration of a variety of education and outreach activities aimed at employees and management personnel;
- The development of guidelines for supervisors, personnel specialists, and ECS staff regarding legal issues; the goal is to clarify the various legal and regulatory requirements regarding drugs in the workplace and to develop a recommended set of actions;
- The development of guidelines regarding appropriate treatment resources for employed persons;
- The provisions of ECS counseling services; and,
- Evaluation and a final report.

It is hoped that the data, approaches, and guidelines generated as a result of this demonstration project will provide new insights regarding drug-related problems in the workforce and more effective means of offering assistance to managers and employees.

Funding is provided by the National Institute on Drug Abuse. The contractor is Vasquez Management Consultants, Chicago, Illinois. The Project Officer is Brenda R. Blair, ECS Administrator, HHS Region V. □

consequences of the untreated illness—a cost-increasing result."

• Further darkening the federal scene were reports that OPM is in process of eliminating the organizational unit charged with responsibility for developing and maintaining alcohol and drug abuse programs for federal employees. A reorganization by OPM calls for reducing the Employee Services Branch, of which the alcohol and drug program is a component, from 10 to 3 positions. Authoritative sources reported that personnel documents indicate that none of the present staff administering the alcohol and drug abuse program will be retained under the truncated new organization.

OPM's alcoholism and drug abuse responsibilities are mandated by the Hughes Act under a provision that survived the legislative overhaul last year.

• Congress inflicted further cuts in the federal alcoholism and drug abuse programs as it passed a continuing resolution providing funds through March for the Department of Health and Human Services (HHS) and other agencies whose regular appropriations for fiscal year 1982 are still pending.

The big alcohol, drug abuse, and mental health services (ADMS) block grant to the states was cut back to only \$432 million—a level which will necessitate a sharply reduced distribution for the second fiscal quarter beginning in January. The first quarter distribution was based on the more generous first continuing resolution enacted last fall, which provided a total \$485 million for the ADMS block. NIAAA funding drops to \$32.7 million under the current continuing resolution, placing research in a budgetary squeeze with only \$20.8 million. The reduced funding levels are jeopardizing a number of critical national activities, including the National Center for Alcohol Education—the contract for which may not be renewed this year—and the National Clearinghouse for Alcohol Information, which may not be renewed this year or a sharply curtailed level of funding.

• The Beverage Alcohol Information Council is opening a new phase of its public and medical education campaign. The effort, which has been focused on the risks of excessive drinking during pregnancy, has been broadened to include alcoholism as a "treatable, identifiable illness."

The BAIC public education program has been under way since 1979 following the Treasury Department's decision against warning labels directed against drinking during pregnancy. The department recommended instead a public education campaign with beverage industry participation. BAIC is a consortium of 10 alcoholic beverage industry trade associations. □

The Washington Arena is by the editors of *The Alcoholism Report*, 1264 National Press Building, Washington, D.C. 20045.

Labor Involvement In Successful EAP

By Douglas K. Maguire
IAMAW

The degree of success of occupational alcoholism programs (or Employee Assistance Program) is determined to some extent by labor's involvement in such programs; yet, most of the information available does not address this in depth, and few people understand the precise mechanisms whereby labor addresses alcoholism among its workers.

The IAMAW District 141, under the leadership of Lou Schroeder, has had an EAP program for many years. The appointed director is Bill Combs. Bill developed and implemented the Machinist's program, which has grown over the years to be recognized as a role model in the industry.

Here at LAX, Local Lodge 1932 has been involved with the EAP for over seven years, and through a joint policy statement, cooperates with United Air Lines.

The IAMAW-UAL EAP program provides training to shop stewards, AGCs, officers, grievance committee, and management on a continuing basis.

As the times change so do programs and the use of them. Many people use our counseling services and come in and or call to discuss personal, family, and job related problems in confidence and receive quality advice and counsel. Some of the areas that we cover are:

- Personal and family crisis.
- Emotional.
- Legal.
- Marital.
- Job problems.
- Behavioral.
- Medical.
- Alcohol and drug abuse.

When dealing with the latter category, the EAP coordinator collaborates with professional counselors in administering the alcoholism and drug abuse program. In fact any problem that has medical implications is cleared through our medical department. The counseling staff is not trained or expected to give medical opinion.

To summarize the activities of the EAP program, I would describe it as an employee assistance program with a strong emphasis on the alcoholism component. As you can see, despite the broadness of our counseling activities we still consider alcoholism as the major health problem in industry today. □

L. F. Presnall Named Winner of OPCA Award

Lewis F. Presnall, long associated with the National Council on Alcoholism later with Kemper Insurance Company, now retired and a highly respected author, has been selected to receive the Annual "Recognition Award" of the Occupational Program Consultants Association, presented each year to a prominent contributor to occupational programming. □

ALMACA's 10th Annual Forum Photo Page



Many of ALMACA's 10th Annual Forum sessions were characterized by standing-room-only crowds, as at the top left. The social events at the Forum (center left) were similarly marked by heavy responses and much animated, sometimes intense discussion. Awards that recognized excellence and dedication to the field were also part of the Forum agenda, as in the bottom left photo of Messrs. Schroeder, Combs, Wrich, and Wood, and (bottom right) Ms. Joan Kroc and Jerry Miller. Events were kept rolling smoothly along by the facilitation of Tom Delaney (immediately below) and others. □

