



Statement of Understanding

This form explains to employees how BJC EAP functions.

Print this form, and fax the completed form to: 314.206.3410 or toll-free 888.505.6311, or mail it to:

BJC Employee Assistance Program
Suite 201
343 South Kirkwood Road
St. Louis, Missouri 63122 USA

BJC Employee Assistance Program (EAP) is provided by your employer at no cost to you and assists in clarifying personal issues, providing short-term counseling, and recommending outside services in the community for problem resolution. You are responsible for payment of the actual services. Insurance may help with some costs.

Confidentiality

EAP will not release personal information unless:

- You provide written consent
- The law requires disclosure (generally, the law does not require information to be released unless life or safety is seriously threatened)
- EAP discerns a threat to security of the company, other individuals, to national security or your failure to meet your employer's criteria for performance of your duties
- Insurance verification is required

Notice of Privacy Practices

I have received or I have been provided the opportunity to receive a copy of the Notice of Privacy Practices that explains when, where and why my confidential health information may be used or shared. I acknowledge that EAP, the counselors and other EAP staff may use and share my confidential health information with orders in order to treat me, in order to arrange for payment of my bill, and for issues that concern EAP operations and responsibilities.

Management Referrals

Your supervisors will not be notified of EAP participation unless referred by your direct-report manager. Only with a signed information release authorization, will EAP inform your directreport manager:

- About your attendance at EAP programming
- If a medical/behavioral problem has been identified (but not the nature of the problem)
- If you are in compliance with a plan to work on the problem



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Voluntary Participation

Participation in EAP is at your discretion. Refusal of EAP services is not, in itself, cause for disciplinary action. However, such refusal to accept help may be taken into consideration when evaluating subsequent unsatisfactory performances or behaviors. Your participation in the EAP does not constitute a waiver of your employer's right to take disciplinary measures in the event of unsatisfactory performance.

I am not on an unapproved leave of absence, suspended or terminated.

I have read the Statement of Understand section and understand its contents.

Signature _____

Witness _____

Consenting Parent/Guardian Signature _____

Date _____