

APPENDIX B – FORM M: PROVIDER’S QUESTIONNAIRE

Service Capability	
1.	What are your hours of operation for live answer of intake calls (not a voice recording)? What is your service guarantee regarding wait times? (define wait time: answering the phone, calling back someone who left a message on the automated line, etc.)
2.	List all available methods for a client to speak with a qualified EFAP counsellor and the hours of operations for each method. What is your service guarantee regarding scheduling an in-person counselling session?
3.	In which languages are you able to provide your services?
4.	Where are the calls to your toll-free number directed?
5.	Describe your counselling network numbers and locations (a) within Manitoba and (b) across Canada.
6.	Are any of your counselling services outsourced? If yes, provide details.
7.	How many people do you employ as intake staff?
8.	How many people do you employ as counsellors?
9.	Does your EFAP include access to a neutral (i.e. provider owned) office location where counsellors are able to meet with their clients? If so, please provide details.
10.	What are your company’s requirements for intake staff credentials and experience?
11.	What are your company’s requirements for counsellors’ credentials and experience, and how many counsellors have a PhD designation in a related field?
12.	How are your resources allocated? (i.e. number of calls directed to each intake staff, number of sessions scheduled per counsellor)

13.	What is your book of business' current average number of sessions required to resolve an issue?
14.	Outline your approach to servicing rural participants, including those in remote locations where a counsellor may not be located, and all additional fees applied.
15.	Describe your Health Risk Assessment service and reporting capabilities.
16.	Describe your Health Screening Clinics and reporting capabilities.
17.	List and describe what types of management support services you provide.
18.	List and describe what mediation services you provide.
19.	List and describe your response to, and services for, any critical incident or crisis.
20.	Identify the mediums through which participants can access counselling.
21.	Describe any affiliations or strategic partnerships with other associated professionals (e.g. psychologists, psychiatrists, physicians, financial consultants, lawyers, etc.)?
22.	What is your service guarantee for expediting counselling when a situation warrants? (i.e. a caller is unhappy with the service they received upon their initial outreach)
23.	Describe your approach to transitioning an individual to long-term counselling from the EFAP, including all forms of support offered.
24.	Outline the process used to monitor a counsellor's physical professional location, including the standard requirements it is measured against.

Online Services & Tools	
1.	Describe your website platform, services and tools, including mobile technology, available to participants, HR Administrators and Managers/Supervisors.
Communication & Reporting	
1.	Outline the promotional/communication support provided and confirm if materials are customizable, including format. Please provide samples.
2.	Describe promotional/communication material distribution methods and frequency.
3.	Advise on the frequency of and process for reporting distribution available and if a minimum number of participants is required to produce data. Confirm if and what type of ad hoc reporting is available.
4.	Describe the components of a typical utilization report (e.g. population accessing services, presenting issues, demographics, website/app hits, etc.) and provide a sample.
5.	Outline the data presented in the annual renewal report (e.g. utilization breakdown, additional services purchased, trend analysis, online usage any proposed changes to current contract, etc.) and provide a sample. Confirm level of reporting, e.g. by class, by department, by union, etc.
6.	Confirm your willingness to participate in employee fairs to raise awareness of your services.
Costs	
1.	Identify per employee per month rate (not including any applicable taxes).
2.	Please complete Form B with reference to all services included in the per employee per month rate, as well as specify services and associated costs that are applied an additional fee.
3.	Confirm any rate guarantee being offered.
4.	Define utilization (i.e. what counts towards utilization within reporting) and specify the utilization assumption if applied to quoted rates.
5.	Describe in detail the year end reconciliation approach and any associated charges. Provide a mathematical example.

6.	Explain your renewal methodology.
Implementation Strategy	
1.	Provide a list of all Account Management team members and include a brief description of their work history and experience.
2.	Describe your overall strategy for implementation, including but not limited to: promotional material customization and distribution, intake and online platform set-up, people leader training, participant orientation, etc.
3.	Describe your employee and management orientation, including how you plan to maintain ongoing awareness.
4.	Describe your transition plan for employees receiving counseling care through current provider.