

**OHIO PSYCHOLOGICAL ASSOCIATION – COLLEAGUE ASSISTANCE PROGRAM  
REFERRAL NETWORK PROVIDER AGREEMENT**

1. The Provider is a professionally licensed psychologist and agrees to maintain professional licensure as a psychologist in Ohio.
2. The Provider agrees to participate in the Ohio Psychological Association Colleague Assistance Program (“OPA-CAP”) Referral Network and to abide by all policies and procedures published by the OPA-CAP.
3. The Provider warrants that all work will be consistent with the highest ethical and professional practice standards and with all pertinent laws and regulations.
4. The Provider certifies that his or her professional licensure, certification, practice privilege, or professional membership has never been revoked, suspended, or restricted by a licensing, certifying, privileging, credentialing, or professional membership body.
5. The Provider agrees, after admission to the OPA-CAP Referral Network, to notify the Ohio Psychological Association immediately of any loss, revocation or suspension of professional licensure; and any disciplinary action or any potential disciplinary action or investigations by a licensing, certifying, privileging or credentialing body. The Provider annually will reaffirm eligibility to participate on the OPA-CAP Referral Network and provide updated contact information.
6. The Provider agrees to hold harmless the Ohio Psychological Association and the OPA-CAP Referral Network for any claim arising out of services provided to a referral from the OPA-CAP Referral Network.
7. The Provider acknowledges that this Agreement is not intended to create, nor shall be deemed or construed to create any relationship between the Ohio Psychological Association and the Provider other than for the sole purpose of participation in the OPA-CAP Referral Network.
8. The Provider, and any of their respective employees, shall not be, nor hold themselves out to be the agent, employee or representative of the Ohio Psychological Association or the OPA-CAP Referral Network. The Provider may not claim any affiliation with the Ohio Psychological Association or the OPA-CAP Referral Network on any advertisement or other marketing material, professional listing, business card, or inducement for service.
9. The Provider agrees to maintain a professional liability policy with minimum coverage of \$1,000,000.00 per occurrence and \$3,000,000.00 in the aggregate.

10. The Provider agrees to accept, at the OPA-CAP Referral Network's request, at least one patient per calendar year.
11. The OPA-CAP reserves the right to remove providers from the OPA-CAP Referral Network for any reason or no reason.
12. The Provider understands that this agreement may be terminated in writing by either party, without cause, at any time.

The Provider has read the contents of this Agreement and agrees to abide by the terms of this Agreement with the OPA-CAP Referral Network.

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Signature

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Printed Name

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Date

Agreement to Participate in the OPA-CAP (2015-04-14)