**PROPOSED TELEHEALTH/VIDEOTHERAPY POLICY AND PROCEDURES**

The following are proposed amendments to the Clinical Policy and Procedure Manual to accommodate the expansion of Center services to include Telehealth/Videotherapy:

Definition: **Telehealth/Videotherapy** involves the delivery of behavioral health care services using electronic communications, information technology or other means between a health care provider employed by or otherwise contracted with the Center (“Provider”) and a patient who are not in the same physical location. Telehealth/Videotherapy is a secured and HIPAA compliant method of delivering behavioral health services using interactive telecommunications and may be used for diagnosis, treatment, follow-up and/or education.

Purpose: Telehealth/Videotherapy services by licensed behavioral health clinicians is adopted to increase access to care, as well as meeting the needs and desires of patients for anonymity and receipt of services in a timelier manner.

**Policy:** General: 1) In addition to the Clinical Policy and Procedures above applying to face-to-face clinical visits, Center licensed professional counselors who employ distance technology for counseling services must observe and demonstrate all aspects of client rights and welfare, client confidentiality, professional responsibility (including relationships with other professionals), procedures for assessment, and resolution of ethical issues reflected in their respective state and/or national licensing boards and associations, including codes of ethics and best-practice standards. Addressing and resolving any disparities between ethical or legally-mandated practices required in face-to-face counseling services versus distance technology counseling services is the ethical duty of the licensed professional counselor. Ethical standards for a licensed professional counselor who employs distance technology counseling services shall apply to client care and public protection regardless of the destination point of such counseling services, unless otherwise prohibited by law.

2) Prior to initiating telehealth/videotherapy services, Center clinicians shall:

* be licensed in the state where the patient is (originating site) and credentialed at the originating site if it is another health care facility. Prior to the delivery of health care via telehealth/videotherapy,
* receive telehealth/videotherapy certification training and education from an industry recognized provider; such training will be in the areas of best practices, such as an introduction to telehealth/videotherapy, legal aspects, selection and use of technology, HIPAA compliance, emergency management, patient screening, ethical and clinical skills, and understanding state guidelines; and
* understand their counseling specialty licensing boards’ and/or professional associations’ educational requirements, guidelines, and ethics as they pertain to providing telehealth/videotherapy services.

3) Billing: Billing for services must be in compliance with State and federal laws as well as in accordance with any third-party payer’s requirements.

4 ) Confidentiality/Privacy: Transmitting Protected Health Information (PHI) including, but not limited to, patient records, diagnostic results, and videotapes must be secure on both the transmitting and receiving ends.

5) Patient Consents: Patient Consents are required documentation prior to the encounter. The provider requesting the telehealth/videotherapy services at the originating site must advise the patient about the proposed use of telehealth/videotherapy, any potential risks, consequences, benefits, and limitations, and obtain the patient’s or the patient’s legal representative’s consent.

6) Medical Record Documentation: Providers must document all telehealth/videotherapy services, provide that documentation to the originating site when applicable, and maintain a copy in the facility’s medical record. The physical location of the patient as well as the physical location of the provider must be documented as well as everyone involved in the clinical encounter, including those who may be off camera. Additional documentation needs are dictated by the service or procedure performed.

7) Clinicians: The clinician who is primarily responsible for the care of the patient and for indicating the patient’s primary diagnosis and the patient and/or the patient’s designee will:

* Determine their clients’ suitability to participate in telehealth/videotherapy (ideally through an initial face-to-face visit).
* Establish alternate means of communication (e.g. phone or other), including what to do if there are technical difficulties during the session;
* Undertake a patient site assessment, including obtaining information on Emergency Resources and for an Emergency Plan including names and contact information for local, trusted person(s) to be contacted at the discretion of the clinician; and
* Agree on guidelines for determining at what point other staff and resources should be recruited to help manage emergencies.
* Agree that the patient has the right to withhold/withdraw consent to telehealth/videotherapy at any time, without affecting his/her right to present/future care/treatment or the loss/withdrawal of any program benefits to which he/she or his/her legal representative would otherwise be entitled.
* Have the patient and/or legal representative sign a written statement, prior to the delivery of health care via telehealth/videotherapy, indicating that he/she understands the information provided and that this information has been discussed with him/her by the provider and/or his/her designee.
* Inform the patient and/or designee that he/she is entitled to be given a description of the potential risks, consequences, benefits, and limitations of telehealth/videotherapy.
* Inform the patient and/or designee that all existing confidentiality protections apply.
* Inform the patient and/or designee that all existing laws regarding patient access to medical/clinical information and copies of such information apply.
* Inform the patient and/or designee that dissemination of any patient identifiable images/information from telehealth/videotherapy interactions with researchers or other entities will not occur without his/her consent.

8) Legal: The patient legal representative must sign a written statement, prior to the delivery of services via telemedicine/videotherapy, indicating that he/she understands the information provided and that this information has been discussed with him/her by the provider and/or his/her designee.