Utah State University Counseling and Psychological Services

POLICY INFORMATION

Document Title: Telehealth

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Approved by: M.S. DeBerard (Executive Director); Joshua McCloud (Associate General Counsel)

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I. **POLICY STATEMENT** The purpose of this policy is to establish guidelines for use of telehealth services. It is the policy of CAPS to comply with all applicable federal and state regulations governing telehealth while ensuring patient access to services through the use of live two-way audio-visual communication. The same standards of care exist with telehealth as are used when assessing and treating the patient on-site. The clinician-patient relationship is the same.

II. **DEFINITIONS**

<u>Asynchronous store and forward transfer</u> are the transmission of a patient's healthcare information from an originating site to a provider at a distant site.

<u>Telehealth</u> means the transmission of health-related services or information through the use of electronic communication or information technology. Services are provided by a healthcare provider to a patient through a method of communication that is, at minimum, end-to-end encrypted (except as may be approved by CAPS during times of national or local emergency):

i. Uses:

a. Asynchronous store and forward transfer; or

b. Synchronous interaction; and

ii. Meets industry security and privacy standards, including compliance with:

a. Utah state law; and,

b. The Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. § 1232g; 34 CFR Part 99)

Distant Site means the physical location of the provider delivering the telehealth services.

Originating Site means the physical location of the patient receiving the telehealth service.

<u>Synchronous Interaction</u> means real-time communication through interactive technology that enables a provider at a distant site and a patient at an originating site to interact simultaneously through two-way audio and video transmission. Telephones, facsimile machines, and electronic mail systems do not meet the definition of a synchronous interaction. III. <u>AUTHORITY AND RESPONSIBILITIES</u> All CAPS employees involved in providing therapy services (including without limitation professional staff, interns, student trainees) will comply with this policy.

IV. PROCEDURES TO IMPLEMENT

1. Confidentiality/Privacy:

a. Prior to an initial telehealth appointment, CAPS will have the patient complete and sign applicable patient information forms and consents. The completed forms will be uploaded into the patient's CAPS file.

b. In order to meet CAPS minimum equipment standards, telehealth sessions will be conducted using only CAPS-approved platforms and equipment.

2. **Patient Consent:** Patient consent must be obtained and documented prior to the appointment. The consent for telehealth services should clearly outline the proposed use of telehealth and any potential risks, consequences, and benefits associated with the services provided. The patient or patient's legal representative must then provide consent for telehealth services.

3. **Medical Record Documentation:** Providers will document all telehealth services in the patient's CAPS file. The physical location of the patient and provider must be included in documentation for all appointments conducted via telehealth. Documentation will be retained according to state and federal medical record retention regulations.

4. Providers Scope of Practice: Per Utah Telehealth Act Code 26-60-101,

a. a provider offering telehealth services will:

i. at all times act within the scope of the provider's license under Title 58, Occupations and Profession, in accordance with applicable state and federal laws and rules.

ii. Be held to the same standards of practice as those applicable in traditional health care settings.

b. obtain from the patient or another provider the patient's relevant clinical history and current symptoms;

c. be available to the patient who receives telehealth services from the provider for subsequent care related to the initial telehealth services, in accordance with community standards of practice;

d. be familiar with available medical resources, including emergency resources near the originating site, in order to make appropriate patient referrals when medically indicated; and

e. in accordance with any applicable state and federal laws, rules, and regulations, generate, maintain, and make available to each patient receiving telehealth services the patient's mental health records.

5. Provider State Licensure: State laws regarding licensure to perform telehealth services vary. Providers are responsible for being aware of and abiding by the current rules/laws governing the state of the originating sites. Where state law requires, providers should be licensed in the state where the Patient is before services are rendered. In situations where the originating site state law allows, the provider may render services under a provisional license or no local license— under the authority of an appropriate order or declaration during a national or local emergency.

V. ATTACHMENTS

A- CAPS Telehealth Consent Form Template

VI. REFERENCES

Utah Telehealth Act- Code 26-60-101

Utah Rule R414-42- Telemedicine