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## **Informed Consent For Telehealth Services**

In telehealth, informed consent is used to explain what telehealth is, lay out the expected benefits and possible risks associated with it to you the patient, and explain security measures. It often requires written acknowledgement which needs to be signed by you and stored in your patient record.

## What is Telehealth?

In short, Telehealth is defined as the use of electronic information and telecommunication technologies to support or promote long-distance clinical health care, patient and professional health-related education, public health, or health administration. Telehealth may include, but is not limited to, telemedicine.

Services delivered via telehealth rely on a number of electronic, often Internet based, technology tools. These tools can include videoconferencing software, virtual environments, mHealth (using some type of mobile or wireless device) and others. *Your provider typically provides telehealth services using the following tools:* Doxy.me or mHealth.

Since this may be different than the type of consultation with which you are familiar, it is important that you understand and agree to the following statements:

- You will need access to the certain technological services and tools to engage in telehealth based services with your provider.
- Telehealth has both benefits and risks, which you and your provider will be monitoring as you proceed with your work.
- It is possible that receiving services by telehealth will turn out to be inappropriate for you, and that you and your provider may have to cease work by telehealth.
- You can stop work by telehealth at any time without prejudice.
- You will need to participate in creating an appropriate space for your telehealth sessions.
- You will need to participate in making a plan for managing technology failures, mental health crises, and medical emergencies.

- Your provider follows security best practices and legal standards in order to protect your health care information, but you will also need to participate in maintaining your own security and privacy.
- If you have any questions or concerns about the above tools, please address them directly with your provider so you can discuss their risks, benefits, and specific application to your treatment.

#### **Benefits and Risks of Telehealth**

#### Receiving services via telehealth allows you to:

- Receive services at times or in places where the service may not otherwise be available.
- Receive services in a fashion that may be more convenient and less prone to delays than in-person meetings.
- Receive services when you are unable to travel to the service provider's office.
- The unique characteristics of telehealth media may also help some people make improved progress on health goals that may not have been otherwise achievable.

#### Receiving services via telehealth has the following risks:

Telehealth services can be impacted by technical failures, may introduce risks to your privacy, and may reduce your service provider's ability to directly intervene in crises or emergencies. Here is a non-exhaustive list of examples:

- Internet connections and cloud services could cease working or become too unstable to use.
- Cloud-based service personnel, IT assistants, and malicious actors ("hackers") may have the ability to access your private information that is transmitted or stored in the process of telehealth based service delivery.
- Computer or smartphone hardware can have sudden failures or run out of power, or local power services can go out.
- Interruptions may disrupt services at important moments, and your provider may be unable to reach you quickly using the most effective tools. Your provider may also be unable to help you person.

There may be additional benefits and risks to telehealth services that arise from the lack of in-person contact or presence, the distance between you and your provider at the time of service, and the technological tools used to deliver services. Your provider will assess these potential benefits and risks, sometimes in collaboration with you, as the need arises.

## Assessing Telehealth's Fit For You

Although it is well validated by research, service delivery via telehealth is not a good fit for every person. Your provider will continuously assess if working via telehealth is appropriate for your situation. If it is not appropriate, your provider will help you find in-person providers (assuming they are available) with whom to continue services.

Please talk to your provider if you find telehealth media so difficult to use that it distracts you from the services being provided, if the medium causes trouble focusing on your sessions, or if there are any other reasons why the telehealth platform seems to be causing problems in receiving services.

Be assured that raising questions or concerns will not, by itself, result in termination of services. Bringing your concerns to your provider is often a part of the process.

You also have a right to stop receiving services via telehealth at any time without prejudice. If your provider also provides services in-person and you are reasonably able to access the provider's in-person services, you will not be prevented from accessing those services if you choose to stop using telehealth.

### Your Telehealth Environment

You will be responsible for creating a safe, quiet, and confidential space during sessions. You should use a space that is free of other people or distractions while also ensuring that no one else will be able to see or hear your interactions with your provider during the session. If you are unsure of how to do this, please ask your provider for assistance.

### **Our Communication Plan**

At our first session, we will develop a plan for backup communications in case of technology failures and a plan for responding to emergencies and mental health crises. In addition to those plans, your provider has the following policies regarding communications:

- The best way to contact your provider between sessions is to call or email them.
- Your provider will respond to your messages within 24 48 business hours.
- Please note that your provider may not respond at all on weekends or holidays.

### Safety and Emergency Plan

As a recipient of telehealth based services, you will need to participate in ensuring your safety during mental health crises, medical emergencies, and sessions that you have with your provider. Your provider has required you to designate an emergency contact giving permission for your provider to communicate with this person about your care during emergencies. Your provider will also develop a plan with you regarding best steps for

what to do during mental health crises and emergencies. It is important that you engage with your provider in the creation of these plans and that you follow them when you need to.

# Your Security and Privacy

Except where otherwise noted, your provider employs software and hardware tools that adhere to security best practices and applicable legal standards for the purposes of protecting your privacy and ensuring that records of your health care services are not lost or damaged. Your provider has addressed this by choosing doxy.me for telehealth delivery, which offers state of the art security and encryption protocols to ensure data integrity and privacy is maintained. As a result, *Doxy.me complies with HIPPA, GDPR, PHIPA/PIPEDA, and HITECH requirements*.

However, as with all things in telehealth, you also have a role to play in maintaining your security. Please use reasonable security protocols to protect the privacy of your own health care information. For example: when communicating with your provider, use devices and service accounts that are protected by unique passwords that only you know.

### Recordings

Please do not record video or audio sessions without your provider's consent. Making recordings can quickly and easily compromise your privacy, your provider will not record video or audio sessions without your prior consent or approval.

# **Financial Responsibility**

In consideration for the telehealth services rendered to me, I agree to pay the charges not covered by any insurer or third party payer, including any deductible or co-payment, or any charges not covered as a result of my failure to provide notification or obtain preauthorization for treatment as required by any insurer or third party payer to The Illuminated Mind, PLLC. Should my account be referred for collection, I agree to pay The Illuminated Mind, PLLC reasonable attorney fees & collection expenses.

Signature of Patient/Representative \_\_\_\_\_

Patient Printed Name

Date signed \_\_\_\_\_