Due to the fragmentation of information regarding telehealth-based services, I attempted to condense many of the “high points” into this form. Information is not exhaustive and each provider should do their due diligence to educate themselves on telehealth-based modalities, including the strengths and limitations, prior to using them. Education can help ensure an appropriate level of competence, and foster general adherence to guiding standards (e.g., APA guidelines). Please note that information is based upon my review and knowledge, and is meant to help colleagues. I am not claiming authorship or ownership of any of the following information, nor am I endorsing one over the other.

**Training Guidelines And Recommendations From Guiding Organizations:**
- Several guiding organizations have created guidelines and recommendations for proper use of telehealth modalities:
  - American Psychological Association: https://www.apa.org/practice/guidelines/telepsychology
  - American Telemedicine Association has many guides and recommendations applicable to psychological practice (Note: some information is behind paywalls, while others are available through organizations such as SAMHSA and their corresponding journal):

**Training Outlets**
- Paid sites: There are many organizations offering webinar/modular trainings, including:
  - American Psychological Association:
    - https://apa.content.online/catalog/product.xhtml?eid=15132
    - https://apa.content.online/catalog/product.xhtml?eid=18936
  - Telebehavioral Health Institute (now on sale due to COVID-19):
    - https://telehealth.org/individual
  - Zur Institute:
    - https://www.zurinstitute.com/
  - American Telemedicine Association:
    - https://www.americantelemed.org/resource_categories/webinars/
  - Telehealth Certification Institute:
    - https://telementalhealthtraining.com/thtc-certificate-courses/product/listing
- (Potentially) Free trainings
  - National Register of Health Service Psychologists (free for members):
Telehealth Information Sheet for Psychologists
Created by Jonathan Perle, PhD, ABPP
March 16, 2020

**Note: Due to rapid field changes, information on this form is subject to change and should be verified by the interested party.**

- The Chicago School of Professional Psychology (currently full, but will have webinars available post presentations on 3/18/20 and 3/21/20 per their emails; you can sign up for waitlist and access to recordings):
  - https://attendee.gotowebinar.com/register/7032167813999270667

**Informed Consent Information:**
- If one searches for “Telehealth Informed Consent” on Google, they can find many examples from individual providers and organizations, including universities and medical centers. Nevertheless, seeking appropriate consultation (including legal) is recommended to ensure comprehensive coverage of the forms.
- American Psychological Association:
- Trust:
  - https://parma.trustinsurance.com/Resources/Articles/sample-informed-consent-form
- California Telehealth Resource Center:
  - https://www.caltrc.org/knowledge-center/best-practices/sample-forms/

**Potentially Helpful Documents:**

**General Practices:**
- American Psychological Association:
- American Academy of Pediatrics:
- American Psychiatric Association:

**Ethics/Legal:**

**Logistics of Practice:**


**Potentially Helpful Books:**


**Additional Suggested Helpful Links:**

- [https://www.telehealthresourcecenter.org/](https://www.telehealthresourcecenter.org/)
- [http://www.caltrc.org/](http://www.caltrc.org/)
- [https://www.cchpca.org/about/national-telehealth-resource-center-partners](https://www.cchpca.org/about/national-telehealth-resource-center-partners)

**General Comments:**

- If considering videoconference- or telephone-based options:
  - Many suggest a face-to-face initial meeting to evaluate the patient for the appropriateness of such services.
  - Create a verification method to ensure both the provider and patient identity before beginning each session.
  - If using videoconference:
    - Ensure a thorough review to ensure that the platform aligns with field recommendations, including, but not limited to, at least 128-bit encryption and high definition (with consideration of resolution and screen size).
    - To ensure HIPAA compliance, the provider should have a Business Associations Agreement (BAA) between themselves (covered entity) and the company that is hosting the service (business associate).
Prior to beginning, the provider should create a safety plan to pre-plan for potential crises that may include the location of the patient, the nearest medical center, local police department, etc. (see attached email as an example).

- If considering smartphone app options:
  - Evaluate if the app has been tested for general use and/or with the population you may be assigning it to.

- If considering cross-state practice:
  - Given ongoing changes and the potential for emergency policies, providers are suggested to reach out to the licensing boards and guiding organization of any states that they aim to practice in. While the safest way is to only practice in states that the provider is licensed in (e.g., Ohio and Texas if licensed to practice in both) until alternative means are fully enacted (e.g., PsyPact; https://www.asppb.net/mpage/legislative), some states have explored the possibility of temporary care for extenuating circumstances.

- Billing insurance for telehealth services:
  - Given rapid changes since the onset of COVID-19, policies are changing very frequently. Policies for telehealth care, as well as methods that must be used by providers to meet the carrier’s telehealth reimbursement standards vary by carrier, and often vary further by state. To better understand the coverage, providers may reach out to their respective insurance panels to explore options and requirements (e.g., MDLive for BCBS?). In supplement of speaking to a representative, depending on when they were signed, some provider-insurance company contracts have telehealth service requirements outlined. As such, providers should review these contracts to ensure that they are providing care in line with the contract to avoid any issues or lack of coverage for those in their care.

**Final Thoughts:**

- If considering telehealth practice, per guiding organizations and research, providers should consider several key factors including, but not limited to:
  - The research related to specific populations and conditions relative to the appropriateness of different telehealth modalities. Not all people/conditions may lend to telehealth services.
  - The research related to specific telehealth modalities (e.g., videoconference, telephone, smartphone app, etc.) and outcomes, including differences between technology-enhanced and face-to-face services.
  - Patient attitudes, past experiences with, and desire to use technology in their care.
  - Ethics and legal.
  - Licensure and jurisdiction.
  - Provider competence.
  - Informed consent.
  - Therapeutic boundaries.
  - Safety planning.
  - Data security.
  - Appropriate note taking and logging of telehealth services.

- If a provider is to begin using telehealth, (if possible) it is suggested that they seek some supervision and/or consultation to ensure appropriate care.