



Webinar Conversation – Telehealth in the COVID-19 Era Hyperlinks from Presentation

Telehealth Policy Changes & Considerations

- ▶ Federal:
 - ▶ CMS: removed requirement that patient must be at a supervised medical or similar site to receive services
 - ▶ <https://www.cms.gov/files/document/covid19-emergency-declaration-health-care-providers-fact-sheet.pdf>
 - ▶ OCR: HIPAA waiver of violation/enforcement discretion
 - ▶ <https://www.hhs.gov/sites/default/files/telehealth-fags-508.pdf>
 - ▶ HHS: waived in state licensure requirement for medical professionals to practice across state lines
 - ▶ <https://www.ncsbn.org/14566.htm>

HIPAA:

<https://www.hhs.gov/about/news/2020/03/17/ocr-announces-notification-of-enforcement-discretion-for-telehealth-remote-communications-during-the-covid-19.html>

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 - https://www.ncsl.org/HHS_Guidance_to_States_on_Regulations_on_Healthcare_Work.html

HIPAA

As of 3/17/20: "OCR will waive potential penalties for HIPAA violations against health care providers that serve patients through everyday communications technologies during the COVID-19 nationwide public health emergency.

This exercise of discretion applies to widely available communications apps, such as FaceTime or Skype, when used in good faith for any Telehealth treatment or diagnostic purpose, regardless of whether the Telehealth service is directly related to COVID-19."

"We are empowering medical providers to serve patients wherever they are during this national public health emergency. We are especially concerned about reaching those most at risk, including older persons and persons with disabilities."

- Roger Severino, OCR Director

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**Telehealth:
Policy Changes & Considerations**


- **State:**
 - Differs from state to state, so learn local regulations and limitations regarding telehealth practices
 - This includes licensure requirements for any type of practice as well as this differs state by state
- **Insurance:**
 - Need to check with each provider to confirm coverage and/or special exceptions for telehealth services

Important Caveat: These changes are in response to the current pandemic and are **temporary exemptions and waivers**

Telehealth: Logistics

- Technology
 - Keep it as simple as possible for yourself and your client
 - HIPAA compliant is ideal and recommended, but use what is available based upon OCR guidance
- Informed consent
 - Expand to include telehealth specific informed consent document
 - Adherence to HIPAA still required and expected
- Record Keeping
 - Similar to in person, but should include:
 - Specify telehealth session
 - Confirmation that informed consent for telehealth was received and how
 - Location of client and provider during session
 - Any technical issues and how resolved

Questions?



Treatment Delivery – Residential/Inpatient

- Varies by site
 - Declared essential employees? – less options for remote work than community
 - Presence of positive case/possible cases
 - Dept. of Corrections – most doing crisis mgt only
 - Reduce or eliminate group treatment
 - Individual therapy in lieu of group
 - Limit group size (5-10 max per room, 6 ft distance, etc.)
- Maximizing Telehealth options where possible:
 - Telepsychiatry
 - Court evaluations (SVP)
 - Attorney visits/court appearances

Staying Connected – Challenges
(clients and colleagues)

- Absence or reduction of direct personal contact
- Non-verbal communication hindered, increased misperceptions
- Split meetings – many staff meetings held via Zoom, conference call, even when all on site – (limit # occupants per room)
- Individualized reactions to COVID19 create new dynamics with clients and colleagues:
 - Reactions range from denial to panic
 - Use of humor – mixed results
 - Lack of control, uncertainty about the future
 - COVID19 - universal vulnerability, shifting boundaries
 - Resistance to traditional interventions
 - Peer pressure – compliance with restrictions
 - Expanded potential for parallel process issues and counter-transference
 - Dualistic Trauma Management

Staying Connected – Suggestions
(clients and colleagues)

- Be patient and flexible (more than usual)
- Enhanced sensitivity for individual reactions to perceived level of threat
 - Model Non judgmental stance
 - Avoid labelling reactions of others
- Back to Basics – reflective listening, empathic regard, 'Counseling 101'
- Use humor with caution
- Aggressively inform to counteract lack of control feelings
 - Personal and situational info that is relevant
 - Not more COVID19 info!

Opportunities

- Increased empathy for our clients
- Unexpected benefits of telecare post-virus
- Longer term approach vs. crisis thinking
- Enhanced sense of community
- Trauma Resilience
- Others?