**Telehealth Informed Consent Tip Sheet for Providers**

**Is written informed consent necessary?** Since state requirements vary, it is important to know the regulatory requirements for your state(s) of practice as well as the state of residency for your patient. It is standard practice to obtain written patient consent for medical care. For telehealth, informed consent should include patient education about telehealth and how it differs from an in-person visit.

A single consent form may be used for multiple visits unless the medical provider changes. At that time, the patient should sign a new form. Otherwise, it is recommended that a new form be signed annually.

Patient communication should include information on the unique characteristics of telehealth services:

* Technologies used, its capabilities and limitations
* Potential technical problems that may occur and what to do if an issue arises
* Agreement that telehealth is appropriate for care
* Available alternatives to telehealth
* Credentials of the practitioner(s) involved

Be sure to set realistic expectations regarding the scope of service, who will be present during the appointment, billing, prescribing policies, and follow-up communications.

**What are the technology risks?** As many of us have probably experienced during remote meetings or webinars, technology does not always work as intended. Problems can occur for the provider, the patient, or both. Some of the technology risks include:

* Transmission errors and lost connections in audio and/or video
* Limitations and/or failure of equipment
* Limitations to privacy and/or security
* Inability to use multimedia commonly used in the office, such as an educational resource

**How can I obtain patient consent?** Obtain patient consent prior to the telehealth visit. Have your informed consent document translated into commonly used languages. Determine if it is necessary to arrange a translator for a telehealth visit.

Documents may be exchanged through:

* The patient portal
* Electronically, either secured email or facsimile
* Standard USPS mail

Ensure receipt of the signed form. The completed documentation should be included in the patient’s medical record. If a patient is unable to return a signed electronic confirmation, document that the consent was reviewed with the patient, the patient is unable to respond electronically, and verbal consent was obtained. If possible, have a second staff member listen and attest as a witness.

**Telehealth Informed Consent for Onsite Visit with Second Provider Sample Form**

**DISCLAIMER**: The information contained in this sample policy/procedure or form is not legal advice but is rather intended to provide guidance for members in developing their own policy/procedure and forms. Members should make sure any policy/procedure or form that is adopted is appropriately customized to specifically address the circumstances and practices of the member.*NOTE: Remove this disclaimer and the Physicians Insurance footer prior to adopting this policy/procedure or form.*

Patient Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date of Birth: \_\_\_\_\_\_\_\_\_\_\_\_

***OPTIONAL PARAGRAPH TO INCLUDE IF TELEHEALTH VISITS IS ONLY BEING USED DURING THE PANDEMIC.*** *During this health care crisis, telehealth visits are offered to follow current federal and state mandates for social distancing and other temporary health care restrictions. This is to protect the health of the community.*

Telehealth visits let you and your providers meet by phone, video, web portal, or other technology. This means that your providers may be in different places when they see you and/or share your records. Your providers can then work together to diagnose and treat you. They can also work together to follow up later about your care.

By talking with your provider, you learn the process, benefits, risks, and other options for telehealth:

**Expected Benefits**

* More efficient evaluation and management of your health
* You can see a specialist who is not close to your home

**Risks and Common Problems**

* Equipment or internet failures could result in more time before a diagnosis or treatment
* Poor connection could make it hard for the provider to see how you are doing and advise the right treatment
* It is rare, but your provider may not be able to get to all of your health records
* It is rare, but your records could be shared, intercepted, and/or changed by someone other than your health care provider despite security measures

**What to Expect**

Other staff may be around during the visit. For example, those who work the technology could be in the room during your visit. A note about your visit will be placed in your health record. The visit may also be recorded as a part of your record. Federal and state privacy and security laws apply to any video, photo, and audio files made and stored. You may be billed for both a facility and provider fee.

You may stop the telehealth visit at any time. Your provider may also stop the visit if they are worried about the connection quality or if they believe that you need to be seen in person.

**Patient Authorization**

Knowing the risks, I am choosing to move forward with a telehealth visit with [insert provider names]. I have been given the chance to ask questions. My questions have been fully answered.

Provider Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ Time: \_\_\_\_\_\_

Patient or Legal Representative Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_ Time: \_\_\_\_\_

Representative’s Relationship to Patient: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_