SCOPE:

Psychiatrists, Licensed Psychologists, and HealthChoices Behavioral Health Managed Care Organizations

PURPOSE:

The purpose of this bulletin is to clarify and reissue guidelines that the Department uses to approve telepsych (i.e., telepsychiatry and telepsychology) programs in the Commonwealth. Telepsych is intended to enhance accessibility to psychiatric and psychological services for individuals, where direct, in-person service is difficult to access.

This issuance of this bulletin shall render the Office of Mental Health And Substance Abuse Services' bulletin, "OMHSAS Guidelines for the Approval of Telepsychiatry" (OMHSAS-11-09) obsolete.

BACKGROUND:

Telepsych is the use of electronic communication and information technologies to provide or support clinical psychiatric and psychological care at a distance. Telepsych is appropriate in situations where on-site services are not available due to distance, location, time of day, or availability of resources.

Telepsych services, as defined by these guidelines, are services provided by a psychiatrist or licensed psychologist within their scope of practice using real-time, two-way interactive audio-video transmission. They do not include a telephone conversation, electronic mail message, or facsimile transmission between a health care practitioner and a service recipient, or a consultation between two health care practitioners, although these activities may support telepsych services.

While telepsych has many clinical applications, for the purposes of HealthChoices, telepsych is limited to the following outpatient services:

- Psychiatric diagnostic evaluations
- Psychological Evaluations

COMMENTS AND QUESTIONS REGARDING THIS BULLETIN SHOULD BE DIRECTED TO:
Office of Mental Health and Substance Abuse Services, Bureau of Policy, Planning & Program Development, P.O. Box 2675, Harrisburg, PA 17105. General Office Number 717-772-7900.
REQUIREMENTS:

1. Telepsych is a service provided in the mandatory Medicaid Managed Care program and can be provided only with an approval from OMHSAS. Telepsych may be used to deliver in-plan services when the psychiatrist or licensed psychologist is not physically available to provide an in-plan service in-person or is not available due to location (the clinic is at an unreasonable distance from available providers), after-hour emergencies (evenings, nights, weekends, or holidays), shortage of professionals, or transportation barriers for individual(s). In general, telepsych should be used for those situations where service would otherwise be prevented or delayed. Interpretive services, including sign language, may be provided as necessary in the provision of a telepsych service. Telepsych is not intended to replace a facility’s capacity to provide in-person psychiatric and/or psychological services, and it is expected that a facility providing telepsych will commit to maintenance of effort regarding the provision of in-person services over time. In instances in which telepsych is proposed by an office or licensed facility without in-person psychiatric and/or psychological capacity, it is expected that the service provider will continue efforts to obtain the capacity for in-person service provision.

2. The individual receiving services must provide informed consent to participate in any services utilizing telepsych. The individual (including the parent/guardian for a child under 14 years of age) has the right to choose the form of service delivery, which includes the right to refuse telepsych services without jeopardizing his or her access to other available services within the agency. The individual must also be made aware of any alternatives available and any challenges that such alternatives will pose, including delays in service, need to travel etc.

3. Confidentiality must be maintained as required by the laws of the Commonwealth and Health Insurance Portability and Accountability Act (HIPAA) without jeopardizing individual access to other available services. Written confidentiality guidelines must be maintained and submitted to the Department of Public Welfare (DPW). All existing confidentiality requirements and protections that apply to written medical records shall apply to services delivered by telecommunications, including the actual transmission of the service, any recordings made during the time of transmission, and any other electronic records.

4. The technology utilized to provide the service must conform to the industry-wide compressed audio-video communication standards for real-time, two-way interactive audio-video transmission.

5. All telepsych transmissions must be performed on a dedicated secure line and/or must utilize an acceptable method of encryption adequate to protect the confidentiality and integrity of the information being transmitted. Transmissions must employ acceptable authentication and identification procedures by both the sender and the receiver.
6. The individual receiving services must be informed and fully aware of the role of the psychiatrist or licensed psychologist and staff who are going to be responsible for follow-up or on-going care.

7. The individual receiving services must be informed and aware of the location of the psychiatrist or licensed psychologist providing the care and all questions regarding the equipment, the technology, etc., must be addressed.

8. The individual receiving services has the right to be informed of all parties who will be present at each end of the telepsych transmission and has the right to exclude anyone from either site (see # 9 regarding emergencies).

9. The individual receiving services has the right to have appropriately trained mental health staff immediately available to them while they are receiving the telepsych service, to attend to emergencies or other needs. While the presence of another person raises the issue of confidentiality, certain psychiatric emergencies may require the presence of others if, for instance, an individual is suicidal, homicidal, dissociated, or acutely psychotic.

10. When services are provided from a location in another state, the psychiatrist/licensed psychologist must be licensed in the Commonwealth of Pennsylvania. A psychiatrist in a neighboring state providing services in Pennsylvania may maintain a reciprocal licensure as an extraterritorial. They must be credentialed, when appropriate, at the facilities where the individual is receiving the services. Ideally, they should be acquainted with the facility and staff involved, either by site visits or other means.

11. The psychiatrist or licensed psychologist must abide by the laws, regulations and policies of the Commonwealth of Pennsylvania, including the Mental Health Procedures Act (MHPA), Act 147, Advance Directives, and any other law, regulation, or policy that guides the service being provided. Out-of-state psychiatrists and licensed psychologists providing telepsych services to Pennsylvania residents must meet the Commonwealth’s licensing and other credentialing requirements and must also abide by all applicable laws, regulations, and policies.

12. All telepsych sites shall have established written quality of care protocols to ensure that the services meet the requirements of state and federal laws and the provider’s established patient care standards.

13. All telepsych sites must have a written procedure detailing a contingency plan for a failure in transmission or other technical difficulties that render the service undeliverable.

14. All providers must be enrolled in the Medical Assistance Program. In addition, the site where the individual is receiving services must have an OMHSAS-approved program description and be enrolled in the Medical Assistance Program.

15. A notation must be made in the medical record that indicates that the service was provided via telepsych and specifies the time the service was started and the time it ended.

**APPROVAL PROCESS:**
1. Any provider who plans to use telepsych for the delivery of mental health services must have the documented endorsement of the county mental health program and the HealthChoices Behavioral Health Managed Care Organization (BHMCO). The documentation of these endorsements must be submitted to the appropriate OMHSAS regional field office along with the completed form found in Appendix 1: Request for Approval of Telepsych Program.

2. The regional office reviews the request and along with any comments or recommendations submits it to the OMHSAS Telepsych Program Review Committee for approval. A response should be received by the provider within 60 days of the date of submission to the regional office.

3. If there is any change or expansion of a previously-approved telepsych program (e.g., add additional locations or expand age specialty (child, adolescent, adult, elderly) etc.), the submission process, as identified above, needs to be followed.

BILLING:

1. Telepsych services are provided only by licensed psychiatrists and licensed psychologists. Billing for the psychiatrist, or licensed psychologist services (with the license number of the psychiatrist or licensed psychologist providing the service) will follow billing protocols as directed by the BHMCO.

2. BHMCOs may reimburse for the cost of the mental health staff who is on site to attend to emergency or other needs (as discussed in bullet 9 of the “Requirements” section above).

3. BH-MCOs may also pay a telehealth originating site facility fee for the technology services provided.

QUALITY MONITORING:

Telepsych program implementation and ongoing monitoring will be the responsibility of the BH-MCO’s. This includes the practice of continuous performance improvement monitoring, utilizing outcomes and consumer satisfaction surveys. The provider must have all performance improvement studies available for review by OMHSAS upon request.

Appendix 1: Office of Mental Health and Substance Abuse Services Request for Approval of Telepsych Program.

REFERENCES:


Office of Mental Health and Substance Abuse Services
Request for Approval of Telepsych Program

1. Name of the requesting behavioral health plan or county program, provider name, provider address, contact person, phone number, provider type, PROMISe number, and license number.

2. Describe the specific service(s) that will be provided by telepsych, including the procedure codes, length of the service, and the population served, i.e., age range served and county to be served.

3. How was the service provided previously? Please also discuss how individuals will be screened for the appropriateness of proposed interventions through telepsych.

4. Why is telepsych needed to provide this service and what are the barriers to providing it on-site?

5. Describe how psychiatrist(s)/licensed psychologist(s) who will be providing the service be involved in the planning process for setting up the service.

6. Describe the locations that will be connected (practitioner site(s) and the site where individuals will receive service) and the county or counties to be served. Specify the name and, if available, the Medical Assistance provider numbers of the providers located at both sites. For out-of-state practitioners not yet enrolled in the Pennsylvania Medical Assistance Program, describe their plans to become enrolled.

7. Describe the equipment that will be used to provide telepsych, including details about the specifications, costs, who is purchasing and paying for the maintenance of the equipment, as well as payment responsibility of the line and transmission fees. Include information about the ongoing provision of technical support.

8. Identify any telecommunications service provider being used for signal transmission and encryption. Describe the software used for the telepsych process including that for data storage and the associated security.

9. If the service involves other agencies, have those agencies been contacted and do they agree to accept the assessment via telepsych? (For example, will the judicial system accept the results of an evaluation that was done via telepsych?)

10. Describe the results of efforts to include stakeholder input, including input of individuals, parents (in cases of children) and advocacy groups. Provide documentation from the counties to be served as well as from the BHMCO that supports this service.
11. Describe the minimum qualifications of the staff that will be available at the individual’s service site and their responsibilities and availability in supporting and assisting the individual at the time of the service. Explain how staff will orient new individuals, including parents or guardians, at the time of the first telepsych service. Also, explain how staff at the site where the individual will receive services will support the individual, when needed, during the telepsych service.

12. Describe how the staff at the individual’s site of service will assist and communicate with the practitioners and individuals, including how staff will be summoned by a practitioner or individual, if needed. Describe how prescriptions or orders for medication will be managed, as well as orders for other services.

13. Submit written patient confidentiality guidelines which describe how confidentiality will be maintained, addressing the issues related to children as needed, including compliance to requirements of the Commonwealth and HIPAA.

14. Describe how and where the medical record will be maintained. Provide information about how medical records will be stored at each site. Describe how protected health information will be communicated between sites.

15. Describe how individual choice will be assured, including what options are available if the individual chooses not to participate or finds the use of telepsych untenable.

16. Describe in detail the process by which the individual will be educated about telepsych and the need to provide written informed consent to participate in the service. Submit a copy of the provider document explaining the telepsych service to the individual, and also a copy of the informed consent form to be given to, and signed by, the individual.

17. Describe plans for the practitioner to become familiar with staff and individuals at the service site. Will the practitioner visit the service site? If routine visits to the service site are planned, how frequently will they occur?

18. Describe the contingency plan needed when there is a failure of transmission or technical difficulties that render the service undeliverable.

19. Describe the performance improvement measures that will be utilized to monitor the service.

20. Identify specific outcomes to be monitored by the agency as well as a plan for collecting outcomes data at the conclusion of the first year of the program.

21. Describe how consumer satisfaction with telepsych services will be assessed and provide a copy of the consumer satisfaction form to be used.

22. Submit written quality of care protocols that ensure that the services meet the requirements of state and federal laws and the agency’s established patient care standards.
23. Describe how the agency (or individual practitioners) will bill for the service.

24. Is this service or any component (e.g. cost of equipment) being funded through reinvestment?

25. Identify the quality reporting process including the preparation of a report of outcomes on an annual basis. The agency must maintain reports on file and make them available for review by OMHSAS upon request.

26. What is the anticipated start date for the project?