

## **Proposed TELEMENTAL HEALTH OUTPATIENT POLICY**

### **(As opposed to TELEMENTAL HEALTH INPATIENT POLICY)**

- I. **SCOPE:** This policy and procedure applies to the system entities in which Deaconess proposes to engage in this service:

**X Deaconess Hospital, Inc.**

II. **PURPOSE:**

- a. To establish guidelines to be utilized for TeleMental Health visits between Deaconess practitioners and off-site patients.
- b. To promote a quality telemental health assessment experience for the patient and practitioner.
- c. To initiate and maintain a continuum of mental health care.

III. **DEFINITIONS:**

- a. **Telemental health:** Telemental health refers to a specific method of delivery of mental health referral services, including a comprehensive initial mental health assessment to determine treatment options using technology to allow a provider to render an examination or other service to a patient at a distant location. NOTE: Patients with suicidal or homicidal ideations are beyond the scope of this service. Patients with acute, non-emergency mental health conditions are candidates for this service if located within Indiana only, as of 5/5/24.
- b. **Video Visits:** The use of a secure, HIPAA compliant, synchronous, audio-video connection where a provider and a patient can connect for medical care when they are not in the same location.

- IV. **POLICY:** To deliver a standard of care in mental health assessments for patients that is equivalent to face-to-face assessments. The standard of care includes appropriate clinical practice, privacy, and confidentiality standards.

V. **RESPONSIBILITIES:**

- a. This policy is owned and maintained by the Telemental Health Department. It is the responsibility of the Department Manager in conjunction with the CARE Team supervisor to ensure the staff has the necessary education, training, and orientation to competently utilize the telemental health platform for communication with patients. Additionally, it is the Department manager and CARE Team supervisor's responsibility to ensure procedures outlined in this policy are followed.
- b. It is the responsibility of the DHS Information Systems (IS) or contracted IS Departments to ensure the equipment is installed and maintained in proper order to maintain effective utilization of the equipment in an efficient and confidential manner.

- c. It is the responsibility of the Department Manager and CARE Team Supervisor to monitor the effectiveness of Telemental Health Assessments and identify quality improvement opportunities based upon performance indicators.
- d. It is the responsibility of DCP's Chief Administrative Officer to ensure compliance with regulatory, organizational, and/or accrediting requirements.
- e. It is the responsibility of DCP's CARE Team Supervisor or designee to communicate to the department staff if the use of Telemental Health assessments is not available due to equipment malfunction or other issues.

## **VI. PROCEDURE:**

### **a. LICENSURE:**

- i. The advanced practice provider must be licensed and hold malpractice coverage in the state the patient is located.
- ii. The advanced practice provider's collaborating physician must be licensed and hold malpractice coverage in the state the patient is located.
- iii. If a new state license is obtained for physician or advanced practice provider, submit the Telemental health New License Notification Form (not yet created specific to Telemental Health)

**b. APPROVED PLATFORMS:** Deaconess Health System partnered with Epic Video Client for our telemental health platform. Epic Video Client allows for an integrated workflow with the Epic charting system utilized within the hospital system. If Epic Video Client fails, Zoom can be used as a backup. Each platform goes through an in-depth approval process. Security and risk assessments are conducted to ensure each platform is compliant with HIPAA's administrative, physical, and technical safeguards. The approved platform may be changed by DHS from time to time.

**c. UNAPPROVED PLATFORMS:** The telemental health department will conduct a bi-annual review to ensure ONLY approved platforms are being used.

### **d. PRIVACY:**

- i. Provider must be in a private space (or using a headset/ear buds) to conduct the visit.
- ii. DHS has signed Business Associate Agreements with approved telemental health platforms, Epic Video Client, and Zoom.

### **e. DOCUMENTATION REQUIREMENTS:**

- i. Providers have the option to use the Epic note template:  
**.VIDEOVISITNOTE**
- ii. Providers may create their own template, but must include the following:
  1. Confirm patient identity
  2. State patient is located in at time of visit
  3. Platform used

4. All other components of an in-person visit

**f. PROVIDER AND STAFF TRAINING:**

- i. The Deaconess Clinic Telemental health Provider Guide is located in the Telemental health section on DWeb. (staticky and ineffective)
- ii. The Telemental health Provider Trainer is available for individual training with each provider and group training with staff. (Really? Has that happened?)
- iii. Trained staff members are empowered to train new staff members at the practice manager's discretion. (I think this has been the sole source of training. Interoffice collaborative training as information was received)

**g. DEACONESS CLINIC TELEMENTAL HEALTH PROVIDER GUIDE:  
(located in the Telemental health section on Dweb)**

- i. Prepare for Video Visit
- ii. Schedule visits: (Do we schedule these visits ourselves???)
  - 1. Schedule a video visit through MyChart
  - 2. Schedule a new video visit from Appointment Desk
  - 3. Change an existing appointment into a video visit
- iii. Patient check in an arrival
- iv. Connecting to Epic Video Client and Conducting a Visit
- v. Choosing Video Visit LOS Charge
- vi. Customizing LOS Speed Buttons
- vii. Add video visit and eCheck-in status columns to your Epic Schedule
- viii. Add video visit column to your DAR
- ix. Launch MyChart sign up and proxy access from the schedule
- x. Adding proxy access
- xi. Complete e-Check-in
- xii. Guidelines for MyChart Epic Video Client video visit

**h. BEHIND SCHEDULE:**

- i. Each office is responsible for establishing a protocol to notify the patient when a provider is running behind schedule.

**VII. OPTIONAL:** Provider compensation will be in accordance with the individual employment contract provisions and cannot be approved to provide Telemental Health services until execution of the appropriate Telemental Health Amendment to the contract.

**VIII. AUTHORITY:**

- a. **Policy Owner:** Telemental Health Clinical Manager
- b. **Coordinate with:** CAO Deaconess Cross Pointe

**IX. REFERENCES:** THIS SECTION LEFT INTENTIONALLY BLANK.

/Annette Metz