Advocating for Telepsychology:
Understanding Challenges and Opportunities to Improve Patient Access

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Reasons for telepsychology?

- Expand practice opportunities?
- Continuity of Care?
- Patient demand?
Reasons for Lack of Patient Access

- Underserved areas
- Lack of specialty providers
- Illness/work/transportation
An Overview of Psychologist Supply and Demand Projections, 2015-30

Key point: Psychologist supply is projected to be insufficient to address unmet need.
Demographics of US Psychology Workforce, 2017

Race/Ethnicity

What are the **legal** issues?

- Payer policies
- Privacy/security compliance issues
- Licensing/Scope of practice issues
Issues to consider **before** engaging in Telepsychology

- Are you engaging in Telehealth or Telepsychology?
- APA Telepsychology Practice Guidelines
- Privacy/Security Issues
- 3rd Party Payer Coverage & Reimbursement Policies (State & Federal)
- Intra-state versus Interstate Practice Considerations (PSYPACT)
Is it telehealth or telepsychology?

Q: If you are using technology in your practice, does that constitute telehealth or telepsychological practice?

A: IT DEPENDS...

What is the defined term?

How is the term defined?

Is it limited to certain technologies? Providers? Settings?
APA Guidelines for the Practice of Telepsychology

- Competence
- Standards of Care
- Informed Consent
- Confidentiality
- Security & Transmission of Data
- Disposal of Data
- Testing & Assessment
- Interjurisdictional Practice

Informed consent overview

Is the patient appropriate for telehealth?

Have you discussed the potential pros & cons about telehealth with the patient?

Have you discussed payment/billing? Privacy/security issues?

Does the patient have access to technology/Wi-Fi?

Have you discussed limits of patient confidentiality?

How have you documented this discussion with the patient?
What to consider as part of the informed consent?

- What are any benefits of using technology in providing services?
- What are any limitations of using technology in providing services?
- What are the known differences between a virtual session and in-person session?
- What kind of technology do you intend to use?
- What other means of communication are available as backup? Is there an emergency contact?
- Is there a back-up plan in case of an emergency?
- What about limits to patient confidentiality?
- Billing/payment issues?
Payer policies for telehealth – Medicare

Only Medicare beneficiaries in HSPAs or non-MSAs

https://datawarehouse.hrsa.gov/tools/analyzers/geo/ShortageArea.aspx

Only interactive audio-video conferencing

Only approved originating sites → NOT a patient’s home or other non-health care setting

Only approved providers → psychologists included

Only approved CPT codes → psychotherapy services included

No separate CPT codes → Place of Service (POS) 02 modifier

- Certifying that broad and code-specific telehealth requirements have been met (e.g., originating site requirement)
- GT/GQ modifiers no longer required except in specific circumstances
Payer policies for telehealth– Medicaid

- Medicaid coverage of telehealth services
- Determined by individual state Medicaid program
- All 50 states’ Medicaid programs have some type of coverage for tele-mental health services
- Alaska, Connecticut, Florida, Hawaii, Iowa, Louisiana, Maine, Mississippi, New Mexico, Nevada, Oklahoma, Tennessee, Utah, Vermont & West Virginia rate highest for Medicaid coverage of tele-mental health services
Payer policies for telehealth – Private Insurance

- Many larger insurance companies cover telehealth as an increasing number of states are enacting insurance coverage mandates for telehealth services.
- But reimbursement rates for in-person versus telehealth may vary
- Like CMS, no separate codes for telehealth services
- Use of “95” modifier + appropriate CPT code
State telehealth coverage mandates for private insurance

- **Private insurance coverage mandate legislation enacted**
- **No coverage mandate**
Insurance Coverage Mandates

- To date, 36 states including DC have enacted laws prohibiting health insurers from refusing to cover services provided via telepractice if those services would be covered if provided in-person.
- Illinois & Massachusetts have laws specifying conditions that insurers must follow if providing telehealth coverage.
- Not all states require reimbursement parity for telehealth.
- Some states allow insurers to limit coverage to in-network providers only.
- Louisiana & Utah apply only to physician services.
- Typically, defined as audio-videoconferencing, not phone, fax or email.
- This state mandate does not apply to federal programs like Medicare.
Compliance with Privacy & Security Rule requirements extends to *all* of your patients’ data

- Rules governing what disclosures of patient health information are permitted
- Policies governing electronic patient health information -- secure transmission, transmission quality, audit trails, breach notification policies

Need a business associate agreement (BAA) with any 3rd party that may have access to your patients’ data

- E.g., accountant, billing service, practice management software, answering service, cloud storage, etc.
HIPAA/HITECH Compliance

- First evaluate how you collect, transmit and store electronic patient health information.
- Need policies and procedures in place for how you securely store, transfer & dispose of patient data.
- If you work in a group practice, consider who needs access to what kinds of patient data and set limits.
- What kind of technical controls do you have in place – anti-virus, anti-malware, firewalls, encryption?
- Take inventory & keep track of what kinds of devices are used in your practice.
- Are all devices and files required to remain within the office? If accessible remotely, what safeguards are in place?
- Use HIPAA-compliant vendors & encryption, when possible.
While some symptom screening instruments are already being administered online frequently, most psychological test instruments & other assessment procedures currently in use have been designed and developed originally for in-person administration.

Psychologists also strive to maintain the integrity of the application of the testing and assessment process & procedures when using telecommunications technology.
Interjurisdictional Practice?

- Psychologists can provide telepsychological services **WITHIN** many states BUT... can they provide services to patients in **OTHER** states?
- How to regulate?
- Not an issue for psychologists working in federal systems
- Efforts underway by some health care professional licensing board groups to establish a discipline-specific, multi-state compact
- Competing efforts at the federal level to establish a federal or national licensure system
Temporary Interjurisdictional Practice

- Consult other jurisdiction’s licensing board website to determine if temporary practice is ok
- If yes, follow the temporary practice policies of the jurisdiction where client/patient is going to be located
  - Some jurisdictions require registration
  - Some are on the honor system.
  - Each jurisdiction has its limit on number of days/year
It is important not to sacrifice ethical practice & compliance with federal and state laws for the sake of convenience that technology offers.
Questions?

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