TRANSITIONING FROM PRACTICE INTO RETIREMENT OR OTHER PURSUITS IS OFTEN AN EXCITING ENDEAVOR FOR PSYCHOLOGISTS. BUT WITHOUT THE RIGHT PLANNING AND PREPARATION, IT CAN ALSO BE DAUNTING. TO HELP GUIDE PSYCHOLOGISTS WHO ARE CONSIDERING RETIREMENT OR A CAREER CHANGE, HERE ARE ANSWERS TO SOME OF THE MOST COMMON QUESTIONS APA’S OFFICE OF LEGAL AND REGULATORY AFFAIRS RECEIVES ON HOW TO STEP AWAY FROM PSYCHOLOGY PRACTICE.

I’VE SET A RETIREMENT DATE. WHEN SHOULD I START NOTIFYING MY EXISTING PATIENTS?
The time frame depends on where and for whom you work. To best answer that question:
» Review your contracts or employee handbook. If you’re employed by or contracted with a facility or health-care practice, check to see if your workplace policy documents or your employment contract spell out notice requirements. Then work with the company to ensure a smooth transition.
» Use your clinical judgment. If you are self-employed, or your workplace documents offer no guidance, how
LEGAL AND REGULATORY ISSUES

You will need to securely store any retained records and be prepared to respond to requests for access, which may be difficult if you have a lot of paper records.

much notice you give may depend on several factors: each patient’s diagnosis, length of the therapeutic relationship and continuing treatment needs. For example, you may want to tell patients with severe conditions who need continued therapy as soon as possible to help them transition to a new psychologist.

» Review APA Ethics Code, particularly standards 10.09 and 10.10, offers guidance on how to protect your patients when terminating therapy.

Before making referrals, you should obtain a written authorization from patients that will allow you to provide copies of their records to their new therapists.

Do I have to notify former patients? How do I do that?

Some states require you to give notice in a prescribed manner, while others don’t, so contact your state psychological association or licensing board to find out.

But either way, patients have the right to access the protected health information in their health records for a period of time, so it’s important to tell them how to get that information.

If your state has no requirements about how to notify former patients, you can use one or more of the following ways to publicize your retirement:

» Publish an ad in the local paper.
» Send a letter to all former patients within the retention window.
» Keep your website active with instructions for requesting records.
» Update your voicemail message to include instructions.

You might consider announcing the closure of your practice four to six weeks in advance to give you time to respond to records requests.

How long should patient records be kept? How do I store them?

State and federal regulations dictate how long you must keep patient records. The Centers for Medicare and Medicaid Services, for example, may require you to retain Medicare patient files for 10 years after last date of service. For psychologists not bound by Medicare or state law requirements, or contractual obligations, the APA Record Keeping Guidelines (on.apa.org/practice-guidelines-record-keeping) recommend that you will need to securely store any retained records and be prepared to respond to requests for access, which may be difficult if you have a lot of paper records.

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you retain adult records for seven years and juvenile records for three years after a patient reaches the age of 18. Be sure to follow your statutory and contractual obligations around record-keeping.

If you are leaving a facility or group practice, contractual arrangements or employer policies may determine whether you or the facility/patient will retain control over your patients’ records for the duration of the required period. If you will be retaining the records after retirement, you will need to store them securely and be prepared to respond to requests for access, which may be difficult if you have a large caseload and a lot of paper records.

If you are unable, or unwilling, to store the records at home or respond in a timely manner to requests for access, make arrangements with a colleague or a Health Insurance Portability and Accountability Act (HIPAA)-compliant storage company to manage this task for you. You will need a HIPAA business associate agreement (BAA) to do this, and there will likely be costs associated with these options. To make document storage more cost effective and efficient, consider using a standard document destruction protocol while you’re still practicing, which will save you from having to sort through everything right before you retire.

If you decide to store records in your home, you could make them more secure by:

» placing them in fire-resistant file cabinets;
» transferring paper records to electronic files for easier storage;
» encrypting your electronic records and using password protection to make sure they are not easily accessed by others.

Under HIPAA, if you store files electronically, you must perform a risk analysis to determine and document any threats and vulnerabilities to the files and document the security measures you’re using to address those risks. Also, under both HIPAA and state laws, you are subject to breach notification requirements if someone were to gain unauthorized access to the files (paper or electronic). Take great care to keep them secure if you store records in your home.

I’ve become close to some of my patients over the years. Is it OK to meet for coffee or pursue friendships after I retire?
The relationship between a psychologist and a patient is not built on equal footing, and the confidential and sensitive nature of your discussions in a professional setting does not equal friendship. You risk harming a former patient by developing a new relationship that can easily slip back into a therapeutic one. Consider why you want to form a friendship and how this would benefit you and the patient. Review APA Ethics Code Section 3 for guidance.

What should I do about my license?
Keep your license active if you think you’ll want to see patients again or do volunteer work. If you don’t foresee practicing in any capacity, you can switch to inactive or, if your state offers it, retired status. Contact your state’s regulatory board to research the options, requirements and costs.

I’m starting to have second thoughts about retiring. What if I’m not sure?
Retirement is your decision. It’s also not permanent, so you can change your mind. If you aren’t sure, consider a trial run by keeping your license active for another year (or two) and reassessing. You will have to meet your state’s CE requirements and pay the fees, but this will give you the time to decide if retirement is right for you.

The words “patient” and “client” are often used interchangeably. This article uses “patient.”

A checklist of tasks for closing your practice can be downloaded at apaservices.org/practice/business/management/tips/closing.pdf.