Telepsychiatry is one of the most widely used telemedicine applications in the United States. Since psychiatry relies predominantly on conversation and observational skills, telepsychiatry provides a reasonable alternative to an office visit for patients who cannot readily access care. One of the key drivers behind telepsychiatry’s growth in the United States is a national shortage of psychiatrists, particularly in specialty areas like child and adolescent psychiatry, and in underserved and rural areas. There has been a national rise in psychiatric consumer needs, but fewer facilities or psychiatrists to treat all patients. Thus, telepsychiatry services have become a popular alternative.

Telepsychiatry can be accessed in the following ways:

- Video conference
- Mobile devices
- Social Media

Regardless of the method used, psychiatrists need to be aware of the potential benefits and limitations in their choices of technologies for particular patients in particular situations. There are many benefits to the use of telepsychiatry, some of which include:

- Provides care to patients living in remote locations
- Can link psychiatrists and other mental health providers who are at great distances with each other to provide patient care and consultation
- Provides patients with second opinions in areas where only one psychiatrist is available
- Improves collaborative services between professionals

Important Risk Management Considerations

Using telepsychiatry does not change the standard of care – it is the same standard used as when the patient is physically present in your office. However, there are additional considerations when practicing telepsychiatry which differ from when the patient is physically in your office. At this time, there is little legal precedent on telepsychiatry. So far the state boards of medical examiners have stated that the standard of care rests at the patient site. (local standard of care).
In addition to the ethical, boundary and professional considerations when engaging in telepsychiatry, there are a number of legal and regulatory issues of which to be aware.

- **Licensure.** Are you licensed to practice medicine/telepsychiatry in the location where the patient is located? Some states have strict regulations about engaging in telemedicine. If your patient is in another state, be informed on the regulations and whether you can practice telepsychiatry in that particular location. If you do not have valid licensure and there is an adverse outcome, you may face a multitude of issues including disciplinary and insurance coverage. Establish with your professional liability carrier whether coverage is provided for interstate use of telepsychiatry. Also, prior to your first session, consider contacting your state board of medicine and the state you wish to practice in to discuss licensure requirements for telepsychiatry.

- **Regulations.** Each state has its own set of laws/regulations. Ensure that you are aware of the regulations within the state the patient is located, such as civil commitment, duty to warn or child endangerment.

- **Out of Country Use.** As with out of state use, if engaging in telepsychiatry in another country, is there a licensure requirement and, if so, do you have licensure to be able to provide telepsychiatry?

- **Privacy.** HIPAA regulations must be observed, as well additional state regulations for privacy, confidentiality and patient rights. There is a popular free videoconferencing platform which is not HIPAA compliant. Ensure the system you are using is HIPAA compliant. Simply because other providers are using a particular non-HIPAA compliant system, does not mean you should. In addition, under HIPAA, “business associate agreements” may need to be in place when using third party applications and services.

- **Policies and procedures.** Have adequate policies and procedures which are compliant with state and federal law.

- **Security.** Network and software security protocols to protect privacy and confidentiality should be in place, as well as appropriate user accessibility and authentication protocols. Measures to safeguard data against intentional and unintentional disclosure should be in place for both storage and transmission.

- **Safety.** Consider whether a patient is appropriate for telepsychiatry. Ensure that there are emergency plans in place should the patient need assistance.

- **Obtain informed consent.** Informed consent should be documented and discussed. Inform the patient of potential risks, benefits, and give him/her the option of not participating in telepsychiatry and that care will not be withheld if he/she chooses not to participate. In some states, this may constitute abandonment of care and a breach of the provider-patient relationship.

- **Documentation is key.**

**Conclusion**

Telepsychiatry is changing the manner in which psychiatry is practiced. There are benefits of this model as well as risks. Keep in mind that laws vary from state to state. Be aware of your jurisdiction’s laws as well as the principles of medical ethics. Finally, should you have questions, please consider consulting with an attorney or risk management professional.
Resources


APA Principles of Medical Ethics, Section 2, article 3: http://www.psych.org/MainMenu/PsychiatricPractice/Ethics/ResourcesStandards.aspx


Center for Telehealth and eHealth Law: http://www.ctel.org


United States Department of Health and Human Services: http://www.hhs.gov/ocr/privacy

End Notes

1 American Telemedicine Association, Practice Guidelines for Video-based Online Mental Health Services, (May 2013).

2 APA Telepsychiatry Resource Document, AACAP Practice Parameter for Telepsychiatry with Children and Adolescents


4 See APA Telepsychiatry Resource Document.

For other timely risk management topics, policyholders can access In Session, our risk management newsletter at apamalpractice.com.

If you have any questions please contact the American Professional Agency, Inc. at 877-740-1777.

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