

# SERENITY NEUROPSYCHOLOGY, PLLC

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## INFORMED CONSENT FOR TELEPSYCHOLOGY

This Informed Consent for Telepsychology contains important information focusing on doing psychotherapy using the phone or the computer. Please read this carefully, and let Dr. Snider know if you have any questions. When you sign this document, it will represent an agreement between you and Serenity Neuropsychology, PLLC.

### **Benefits and Risks of Telepsychology**

Telepsychology refers to providing psychotherapy services remotely using telecommunications technologies, such as video conferencing or telephone. One of the benefits of telepsychology is that the patient and clinician can engage in services without being in the same physical location. This was proven to be very helpful during the COVID-19 pandemic and many patients found they preferred telepsychology because of the convenience. Many patients have been able to keep their appointments that would have otherwise been cancelled at times when they are not feeling well and do not wish to drive into town and/or expose others to illness. Telepsychology, however, requires technical competence. Although there are benefits of telepsychology, there are some differences between in-person psychotherapy and telepsychology, as well as some risks. For example:

Risks to confidentiality. Because telepsychology sessions take place outside of the therapist's private office, there is potential for other people to overhear sessions if you are not in a private place during the session. Dr. Snider will take reasonable steps to ensure your privacy. It is important for you to make sure you find a private place for your session where you will not be interrupted. It is important for you to protect the privacy of your session on your cell phone or other device. You need to participate in therapy only while in a room or area where other people are not present and cannot overhear the conversation. Dr. Snider cannot stress this fact enough. You need to feel as comfortable at your home sharing sensitive information as you would feel in a formal office. Insurance companies also have strict guidelines related to maintaining your confidentiality during telepsychology sessions in their willingness to cover the sessions.

Issues related to technology. There are many ways that technology issues might impact telepsychology. For example, technology may stop working during a session, other people might be able to get access to the private conversation, or stored data could be accessed by unauthorized people or companies. Please know Dr. Snider uses a HIPAA compliant platform that makes it so where your session does not get recorded or stored after you close out of the session. You can also sign in with just your first name when prompted by the telepsychology system. This sign in process is simply to notify that you are ready to connect.

Crisis management and intervention. Dr. Snider will not engage in telepsychology with patients who are currently in a crisis situation requiring high levels of support and intervention.

Efficacy. Most research shows that telepsychology is about as effective as in-person psychotherapy. However, some therapists and psychologists believe that something is lost by not being in the same room. For example, there is debate about a therapist's ability to fully understand non-verbal information when working remotely.

## **Electronic Communications**

You may have to have certain computer or cell phone systems to use telepsychology services. Typically, you are solely responsible for any cost to you to obtain any necessary equipment, accessories, or software to take part in telepsychology should this be a way you wish to do therapy. Sometimes the only option is to conduct the session via a phone call, which some insurances will not cover UNLESS it is a phone in which you can be seen. This requires going to a link via your email from the setting of your phone and connecting the same way someone would with a computer. Returning to in person treatment is also an option.

For communication between sessions, Dr. Snider uses email communication and text messaging with your permission for administrative purposes. This includes things like setting and changing appointments, billing matters, and other related issues. You should be aware that we cannot guarantee the confidentiality of any information communicated by email or text. Therefore, Dr. Snider will not discuss any detailed clinical information by email or text and request you do not either. Also, email and texts may not be regularly checked or responded to immediately so these methods **are not to be used if there is an emergency**. Only Dr. Snider's personal cell phone can receive texts and will have been given to you on an individual basis. Do NOT text the business line (208-957-5450). If you need to leave a voicemail or need to discuss something verbally, Dr. Snider prefers that you contact the business line instead of the personal cell.

Treatment is most effective when clinical discussions occur at your regularly scheduled sessions. But if an urgent issue arises, feel free to attempt to reach Dr. Snider by phone. Attempts are made to return your call within 24 hours except on weekends and holidays. Remember Serenity Neuropsychology PLLC does not have an answering service and does not have someone available to see you 24/7. If you are having an emergency, regardless of clinic availability, as always you are expected to call 911 or go to the nearest emergency facility.

## **Confidentiality**

Dr. Snider has a legal and ethical responsibility to use best efforts to protect all communications that are a part of telepsychology. However, the nature of electronic communications technologies is such that we cannot guarantee that communications will be kept confidential or that other people may not gain access to communications. We use updated encryption methods, firewalls, and back-up systems to help keep your information private, but there is a risk that our electronic communications may be compromised, unsecured, or accessed by others. You should also take reasonable steps to ensure the security of communications (for example, only using secure networks for telepsychology sessions and having passwords to protect the device you use for telepsychology). As explained above, HIPAA compliant programs are used during this process, which allow the maximum protection for your privacy.

The extent of confidentiality and the exceptions to confidentiality outlined in the Patient-Psychologist Agreement Form still apply in telepsychology (signed at the beginning of treatment and reviewed annually for those who remain in treatment). Please let Dr. Snider know if you have any questions about exceptions to confidentiality.

## **Appropriateness of Telepsychology**

At this point, all insurance companies seem to be allowing telepsychology as a means to help patients continue treatment. It is still uncertain as to what rules and guidelines various insurance companies may implement in the future. That being said, now that we have learned how to navigate this treatment at this time of crisis, in the future if you are unable to keep your appointment due to conflict of schedules, illness, and/or other reasonable situations, **and** if your insurance covers this treatment, we can discuss if you would like to **rarely** receive treatment via telepsychology (in the event you have chosen to otherwise return to in person treatment). This will be determined on a case-by-case basis and may not be appropriate in all situations and or with all patients. We may not be able to implement in the last moment.

## **Emergencies and Technology**

Assessing and evaluating threats and other emergencies can be more difficult when conducting telepsychology than in traditional in-person therapy. To address some of these difficulties, an emergency plan is created before engaging in telepsychology services. You will be asked to identify an emergency contact person who is near your location and who Dr. Snider will contact in the event of a crisis or emergency to assist in addressing the situation. We will ask that you sign a separate authorization form allowing Dr. Snider to contact your emergency contact person as needed during such a crisis or emergency.

If the session is interrupted for any reason, such as the technological connection fails, and you are having an emergency, do not attempt to call the clinic; instead, call 911 or go to your nearest emergency room. Please update Dr. Snider after you have obtained emergency services.

If the session is interrupted and you are not having an emergency, disconnect from the session and Dr. Snider will send the link to you again. If unable to connect, Dr. Snider will call you and see if technological issues may be problem solved.

If there is a technological failure and you are unable to resume the connection, you will only be charged the amount of actual session time.

## **Fees**

The same fee rates will apply for telepsychology as apply for in-person psychotherapy. If you feel more comfortable, you may also contact your insurance company prior to engaging in telepsychology sessions. Codes used for therapy are 90834 and 90837. Under typical circumstances in the past (prior to the pandemic), insurance or other managed care providers may not cover sessions that are conducted via telecommunication. If your insurance, does not cover electronic psychotherapy sessions, you will be solely responsible for the entire fee of the session if telepsychology is your preferred method of treatment. This would be the case if at any point your insurance determines they will not cover telepsychology and you do not wish to terminate or return to in person treatment.

## **Records**

The telepsychology sessions shall not be recorded in any way. Dr. Snider will maintain a record of your session in the same way she maintains records of in-person sessions in accordance with clinic policies.

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**Informed Consent for Telepsychology**

This agreement is intended as a supplement to the general informed consent/patient-psychologist agreement form that was agreed to at the beginning of your clinical work and that is signed on an annual basis. It does not amend any of the terms of that agreement. Your signature below indicates agreement with its terms and conditions.

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Patient's Printed Name

\_\_\_\_\_  
Patient's Signature

\_\_\_\_\_  
Date