



Supporting WA State Behavioral Health Providers to Optimize Telehealth in Response to COVID-19

Q&A from BHI Telehealth Training Session #1 April 22, 2020: Telehealth Nuts & Bolts Kick-Off

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Q: Does each provider need their own Zoom account? Should you require a password on Zoom for patient appointments?

A: Each clinician should request their own Zoom license, as each clinician will need to sign into their own account in order to use the Zoom functionality such as the Zoom waiting room function. You may set up a password for the recurring Zoom meeting link for telemedicine appointments for patients, but it will require an additional step in the workflow: a method for sending that password to the patient. Please see the following links for HCA guidelines related to Zoom:

<https://www.hca.wa.gov/assets/billers-and-providers/zoom-telehealth-faq.pdf>

and

<https://www.hca.wa.gov/billers-providers-partners/prior-authorization-claims-and-billing/request-zoom-license-connect>

Q: I've seen several vendors (including Zoom) saying that their technology is HIPAA compliant. What guidelines/requirements constitutes an application, such as Zoom, to be HIPAA/42 CFR compliant?

A: There are several telehealth platforms that are HIPAA compliant or offer a HIPAA compliant version. Telehealth platforms, such as Zoom, are often a "pass-through," i.e., vendors do not record or store, and also use additional safeguards, such as encryption and passwords, to ensure security and privacy, but this should be confirmed and documented in a Business Associates Agreement between the vendor and the entity purchasing the technology for HIPAA-compliant use. Zoom licenses obtained via HCA are HIPAA- and 42 CFR-compliant and are covered by the BAA between the HCA and Zoom. For additional assistance regarding telehealth technology, please contact the national Telehealth Technology Resource Center at 844-242-0075 or www.telehealthtechnology.org.

Q: Could you say more about the relaxed HIPAA situation?

A: The Office of Civil Rights (OCR) has a waiver in place during the Covid19 PHE - effective 3/17/20. In summary, a covered health care provider who wants to use audio or video communication technology to provide telehealth to patients during the COVID-19 PHE can use any non-public facing remote communication product that is available to communicate with patients. OCR is exercising its enforcement discretion and will not impose penalties for noncompliance with the HIPAA Rules in connection with the good faith provision of telehealth using such non-public facing audio or video communication products during the COVID-19 PHE.

This exercise of discretion applies to telehealth provided for any reason, regardless of whether the telehealth service is related to the diagnosis and treatment of health conditions related to COVID-19.

Please see <https://www.hhs.gov/hipaa/for-professionals/special-topics/emergency-preparedness/notification-enforcement-discretion-telehealth/index.html>

Q: We have clients who are sheltering in place out of state. What are the requirements that apply here vis a vis continuing care and what state clinicians are licensed in?

A: PreCovid19, the provider must be licensed in the state where the patient is located at the time of the appointment. During the Covid19 PHE, the concept still holds true, however:

1. CMS has temporarily waived Medicaid and Medicare requirements to be licensed in the patient state with several stipulations:

- a. Provider is enrolled in Medicare
- b. Provider has a valid license in the state which relates to Medicare enrollment
- c. Provider is providing services in a state where an emergency is occurring
- d. Provider is not excluded from practicing in any state that is part of the emergency

<https://www.cms.gov/files/document/summary-covid-19-emergency-declaration-waivers.pdf>

2. However state requirements still apply, and each state has unique rules during Covid19. See:

<https://www.fsmb.org/siteassets/advocacy/pdf/states-waiving-licensure-requirements-for-telehealth-in-response-to-covid-19.pdf>

For more information, please see:

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Behavioral Health Providers across Washington State are on the front lines providing critical mental health and substance use treatment during an unprecedented public health emergency. State and federal guidelines continue to evolve so that more providers may use telehealth during the COVID-19 pandemic. Organizations from across the state have responded in amazing fashion to assure that providers across the continuum and age spectrum have access to information and resources necessary to help you begin or expand your use of telehealth.

<https://bhi-telehealthresource.uwmedicine.org/Pages/About-Us.aspx>



Northwest (HHS Region 10)

MHTTC

Mental Health Technology Transfer Center Network

Funded by Substance Abuse and Mental Health Services Administration

We provide training and technical assistance (TA) in evidence-based practices (EBPs) in SAMHSA's Region 10 (Alaska, Idaho, Oregon, and Washington). Our target workforce includes behavioral health and primary care providers, school and social service staff, and others whose work has the potential to improve behavioral health outcomes for individuals with or at risk of developing serious mental illnesses.

Funded by the Substance Abuse and Mental Health Services Administration (SAMHSA), the MHTTC Network includes 10 Regional Centers, a National American Indian and Alaska Native Center, a National Hispanic and Latino Center, and a Network Coordinating Office. This work is supported by grant SM 081721 from the Department of Health and Human Services, Substance Abuse and Mental Health Services Administration.