

TELEMENTAL HEALTH INFORMED CONSENT

I, _____, hereby consent to engage in teletherapy with Tatiana Popov, LICSW. Teletherapy is a form of psychological services provided via internet technology, which can include consultation, treatment, transfer of medical data, emails, telephone conversations and/or education using interactive video. I also understand that teletherapy involves the communication of medical/mental health information, both orally and/or visually.

Teletherapy has the same purpose or intention as psychotherapy or psychological treatment sessions that are conducted in person. However, due to the nature of the technology used, I understand that teletherapy may be experienced somewhat different than the face-to-face treatment sessions. You may choose to stop receiving services by telemental health at any time without prejudice.

Tatiana Popov, LICSW uses VSee as her form of HIPPA compliant software to conduct telehealth sessions. You will need to download VSee Messger to either a computer, phone, tablet or another device or log onto their website at VSee.com to set up your account to be able to participate in teletherapy. You will also need internet connection or data on your device in order to use the software.

BENEFITS & RISKS

Receiving services via telemental health allows you to:

- Receive services at times or in places where the service may not otherwise be available.
- Receive services in a fashion that may be more convenient and less prone to delays than in person meetings.
- Receive services when you are unable to travel to the service provider's office.
- The unique characteristics of telemental health media may also help some people make improved progress on health goals that may not have been otherwise achievable without telemental health.

Receiving services via telemental health has the following risks:

- Telemental health services can be impacted by technical failures, may introduce risks to your privacy, and may reduce your service provider's ability to directly intervene in crises or emergencies. Here is a non-exhaustive list of examples:
 - o Internet connections and cloud services could cease working or become too unstable to use thereby interrupting the session.
 - o Cloud-based service personnel, IT assistants, and malicious actors ("hackers") may have the ability to access your private information that is

transmitted or stored in the process of telemental health-based service delivery.

- Computer or smartphone hardware can have sudden failures or run out of power, or local power services can go out.
- Interruptions may disrupt services at important moments, and your provider may be unable to reach you quickly or using the most effective tools. Your provider may also be unable to help you in-person.

• There may be additional benefits and risks to telemental health services that arise from the lack of in-person contact or presence, the distance between you and your provider at the time of service, and the technological tools used to deliver services. Your provider will assess these potential benefits and risks, sometimes in collaboration with you, as your relationship progresses.

DISCLOSURE: Regarding Third-Party Access to Communications

Please know that if we use electronic communications methods, such as email, texting, online video, and possibly others, there are various technicians and administrators who maintain these services and may have access to the content of those communications. In some cases, these accesses are more likely than in others.

YOUR TELEMENTAL HEALTH ENVIRONMENT

You will be responsible for creating a safe and confidential space during sessions. You should use a space that is free of other people. It should also be difficult or impossible for people outside the space to see or hear your interactions during the session. If you are unsure of how to do this, please ask for assistance.

PAYMENT & INSURANCE

Tatiana Popov, LICSW will bill your health insurance as she would for an in-person to visit with modifiers stating that this was a telehealth visit and video technology was used to conduct the session. You may also choose to privately pay for these services without your insurance. Payment from any health plan or insurance company is not guaranteed, therefore you have agreed to the cost of the session if it is not covered or not fully covered by your plan/insurance company. It is recommended that you call your insurance company directly and speak with them regarding your specific plan and their coverage for teletherapy services.

EMERGENCY SERVICES

I accept that teletherapy does not provide emergency services. If I am experiencing an emergency situation, I understand that I can call 911 or proceed to the nearest hospital emergency room for help. If I am having suicidal thoughts or making plans to harm myself, I can call the King County Crisis Line at or 1.866.427.4747 or National Suicide Prevention Lifeline at 1.800.273.TALK (8255) for free 24 hour hotline support. I can also contact the 24-hour crisis text line 741741.

SECURITY & PRIVACY

Except where otherwise noted, your provider employs software and hardware tools that adhere to security best practices and applicable legal standards for the purposes of protecting your privacy and ensuring that records of your health care services are not lost or damaged.

As with all things in telemental health, however, you also have a role to play in maintaining your security. Please use reasonable security protocols to protect the privacy of your own health care information. For example: when communicating with Tatiana Popov, LICSW use devices and service accounts that are protected by unique passwords that only you know. Use private password protected internet connections.

It is my policy to use HIPAA compliant encrypted password protected email and a HIPAA compliant telehealth platform. Tatiana Popov, LICSW will hold telehealth visits in a space conducive to confidentiality for the client. Tatiana Popov, LICSW takes reasonable steps to protect confidentiality. She is not liable for improper disclosure of confidential information that is not caused by negligence or misconduct.

MY SIGNATURE BELOW INDICATES I AM AGREEING THAT I HAVE READ, UNDERSTOOD AND AGREE TO THE ITEMS CONTAINED IN THIS DOCUMENT.

Signature

Date

If you decline to use VSee for whatever reason and chose an alternative platform for teletherapy, that must be agreed upon with Tatiana Popov, LICSW. You also understand and agree it may not be HIPPA compliant and the same level of confidentiality cannot be ensured. If you chose this option, please list the preferred platform(s) below and sign this portion in addition to the entire agreement. This states that you have understood, all questions have been answered, and you accepted all liability of lack of HIPPA compliance and the risks associated with it, but still would want to use the platform(s) you have named.

Preferred Platform Name(s): _____

Signature

Date