

Informed Consent for Telehealth Services

By signing this document, I agree if I am in crisis or in an emergency, I should immediately call 9-1-1 or seek help from a local hospital or crisis-oriented health care facility in my immediate area.

I understand that telehealth psychotherapy services are not appropriate for use for emergencies and crisis situations.

Definition of Telehealth: Telehealth involves the use of electronic communications to enable Monica Michael, LPC to connect remotely with clients using live interactive video and audio communications. Telehealth includes the practice of psychological health care delivery, diagnosis, consultation, treatment, referral to resources, education, and the transfer of medical and clinical data.

I understand that I have the following rights with respect to telehealth:

1. The laws that protect the confidentiality of my personal information that I have already signed also apply to telehealth. Copy of my Professional Disclosure form has been provided.
2. I understand that I have the right to withhold or withdraw my consent to the use of telehealth in the course of my care at any time, without affecting my right to future care or treatment.
3. I understand that there are risks and consequences inherent with telehealth, including, but not limited to, the possibility, despite reasonable efforts on the part of the counselor, that:
 - a. The transmission of my personal information could be disrupted or distorted by technical failures,
 - b. The transmission of my personal information could be interrupted by unauthorized persons, and/or the electronic storage of my personal information could be unintentionally lost or accessed by unauthorized persons.

Monica Michael uses secure, encrypted HIPAA compliant audio/video transmission software to deliver telehealth via GSuite Google Meet or TherapyNotes LLC.

4. Monica Michael endeavors to abide by the regulations for telehealth by the State of Michigan and ethical standards of the American Psychological Association and the American Counselors Association.

Payment for Telehealth Services:

As for any medical service, clients are responsible for payment in full. Since not all medical insurance policies cover telehealth services, it is best to call your insurance company to ask if your policy covers telehealth for mental health services.

Currently, Monica Michael participates with Blue Cross/Blue Shield and Blue Care Network. For clients enrolled in these programs the standard copays and/or deductibles apply and Monica will submit your claims to these companies for consideration.

For clients with coverage from all other insurance plans, once you have paid for the service, Monica will provide you with a receipt that will contain all the information you will need to submit your claims to your insurance company.

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Patient Consent to the Use of Telehealth:

I have read and understand the information provided above regarding telehealth.

I have discussed this disclosure with my counselor, and all of my questions have been answered to my satisfaction.

I have read this document carefully and understand the risks and benefits related to the use of telehealth services and have had my questions regarding the procedure explained.

I hereby give my informed consent to participate in the use of telehealth services for treatment under the terms described herein. By my signature below, I hereby state that I have read, understood, and agree to the terms of this document.

Print Client Name _____

Client's Signature/Date _____

Print Parent or Legal Guardian's Name _____

Parent or Legal Guardian's Signature/Date _____

Therapist Name: Monica Michael, LPC

Therapist's Signature/Date _____

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