

Telehealth Informed Consent
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Client Name: _____

Date of Birth: _____

Purpose of Telehealth

Telehealth involves the delivery of mental health services using interactive video, audio, or other electronic communications that allow the clinician and client to communicate in real time from different locations. The purpose of telehealth is to provide convenient, flexible access to therapy services when in-person sessions are not possible or preferred.

Eligibility

Telehealth services are available to clients located within the State of Georgia at the time of the session. You must inform your therapist if you will be physically located outside Georgia, as it is possible that services may not be provided if you are out of state due to licensing regulations.

Technology Requirements - You will need:

- A device with a camera, microphone, and reliable internet connection.
- A private, quiet location free from interruptions.
- Access to the agreed-upon telehealth platform (e.g., HIPAA-compliant video link).

Potential Risks

- Technical issues: Delays, interruptions, or disconnections may occur. If technical difficulties happen, we will attempt to reconnect or reschedule.
- Confidentiality risks: While encryption is used, there is always a small risk that electronic communications could be accessed without authorization.
- Limitations: Telehealth may not be appropriate for all situations. Your therapist may recommend in-person sessions if telehealth is not clinically suitable.

Confidentiality

- All laws and standards of confidentiality that apply to in-person therapy also apply to telehealth.
- HIPAA-compliant platforms are used, but you are responsible for securing your own environment and technology.

Emergency Procedures

- Telehealth is not for crisis situations
- If are in crisis or at risk of harm to yourself or others, call 911, go to your nearest emergency room, or call/text 988. You must provide your current physical address and emergency contact at each session in case of emergency

Parental/Guardian Consent for Minors - For clients under 18:

- A parent/legal guardian must give consent for telehealth services and their contact information will be kept on file.
- The adult must ensure the minor is in a safe and appropriate environment during sessions.

Billing

- Telehealth sessions are billed at the same rate as in-person sessions.
- I am an out-of-network provider and do not bill insurance directly. You may request a superbill to submit to your insurance company for potential reimbursement.

Consent - By signing below, you understand and agree that:

1. Telehealth services are provided under Georgia law and professional standards.
2. You understand the benefits and risks of telehealth and you have had the opportunity to ask questions.
3. You may withdraw consent at any time.

Client/Parent/Guardian Signature (if minor): _____ **Date:** _____