□ I have reviewed my state’s law on telemedicine, including, but not limited to:
   □ In-person examination requirements
   □ Prescribing requirements

_Pandemic note:_ States may have waived some of the requirements during their COVID States of Emergency, but most of these waivers have ended / are ending.

□ If I’m located in a state where I’m not licensed, and I’m not seeing any patients located in that state:
   □ I have confirmed with that state’s licensing board that no license is necessary to treat patients not located in that state.

□ If a patient will be treated in a different state:
   □ Licensure
      □ I am licensed in the patient’s state, all state requirements are met (CME requirements, PMP requirements, etc...)
   □ Law
      □ I have reviewed the law on telemedicine in the patient’s state, including, but not limited to:
         □ In-person examination requirements
         □ Prescribing requirements
         □ Informed Consent

□ I am using HIPAA-compliant equipment
   □ If the equipment vendor stores any patient information, I have a Business Associate Agreement (BAA) from the vendor

_Pandemic note:_ The federal government has temporarily exercised “its enforcement discretion and will waive potential penalties against health care providers that serve patients through everyday communication technologies during the COVID-19 nationwide public health emergency. This exercise of discretion applies to widely available communication apps, such as FaceTime or Skype, when used in good faith for any telehealth treatment or diagnostic purpose.” However, to protect psychiatric treatment information, the advice is to utilize a platform that will provide a BAA to the extent possible.
☐ I understand that services are considered rendered at the patient’s location, not my location

☐ I understand that the standard of care for telepsychiatry services is the same as for in-person visits. So, for example, just as you need to get a patient in crisis to the hospital from your office, you would need to be able to call emergency services if a remotely treated patient is in crisis. Be sure to obtain the patient’s exact location at the beginning of each session.

☐ I understand that this treatment modality is not appropriate for all patients and I engage in careful patient selection

☐ I re-evaluate periodically the appropriateness of treatment

☐ I require patient identification at the first session

☐ I obtain the patient’s exact location at the start of every session - primarily, in the unlikely event emergency services are needed, and secondarily, for licensure purposes.

☐ I obtain informed consent to the use of telepsychiatry, in addition to informed consent to treatment

☐ If I am prescribing:

☐ I am complying with state law in my state and, if different, state law in the patient’s state

☐ I am checking the Prescription Monitoring Program, as applicable

☐ I am complying with Federal law, if prescribing controlled substances, by:

☐ Having a DEA registration in my state as well as each patient’s state (if different from my state)

**Pandemic note:** The DEA has temporarily waived the requirement to have a DEA registration in the patient’s state for the duration of the federal COVID Public Health Emergency.

☐ AND seeing patient one time in person prior to prescribing controlled substances

OR

☐ Qualifying for one of the DEA’s very limited exceptions to the one in-person visit rule

**Pandemic note:** The DEA has reminded providers of the public health emergency exception to the one in-person visit prior to prescribing controlled substances. [www.deadiversion.usdoj.gov/coronavirus/html](http://www.deadiversion.usdoj.gov/coronavirus/html)
I provide appropriate patient monitoring, including follow-up on testing ordered

I provide appropriate follow-up care

I maintain appropriate documentation of all sessions

I have contingency plans for:
  □ Clinical emergencies – including contact information for local authorities in the event of a crisis
  □ Technical failures, such as continuing the interrupted video sessions by phone

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