TELEMEDICINE POLICY
(MENTAL HEALTH)

(a) Applicability and Scope. The purpose of this Policy is to implement a Telemedicine policy that improves access to mental health care services in Oklahoma by enabling the provision of mental health care statewide and to increase access to mental health care services in order to meet the needs of the patient, while complying with all applicable federal and state statutes and regulations.

(b) Definitions. The following words and terms, when used in this Part, shall have the following meaning, unless the context clearly indicates otherwise.

1. "Distant site" means the site where the physician providing the mental health service is located at the time the service is provided via audio/video telecommunications.

2. “Physician” means an MD or DO with an unrestricted license that provides mental health services at the distant site.

3. "Health Care Professional" means an Oklahoma licensed or certified health care professional other than an MD or DO.

4. “Presenter” means a health care professional that is at the originating site with the patient and at the start of the telemedicine visit, presents the patient to the physician at the distant site.

5. "Originating site" means the location of the patient receiving mental health care services at the time the service is being performed by a physician via audio/video telecommunications.

6. "Tele-health" means the use of telecommunication technologies for clinical care (telemedicine), patient teaching and home health, physician and health care professional education (distance learning), administrative and program planning, and other diverse aspects of a health care delivery system.

7. "Telemedicine" means the practice of health care delivery, diagnosis, consultation and treatment and the transfer of medical data through interactive audio, video and data communications that occur in the real-time or near real-time and in the physical presence of the patient. For
purposes of the delivery of mental health care via telemedicine, the use of telemedicine shall be considered a face-to-face, in-person encounter between the physician and the patient, including the initial visit.

(8) "Store and forward" means the asynchronous transmission of medical information to be reviewed at a later time by a physician at the distant site. A patient’s medical information may include, but is not limited to, video clips, still images, x-rays, MRIs, EKGs and EEGs, laboratory results, audio clips, and text. The physician at the distant site reviews the case without the patient being present.

(9) "Video conferencing" means conferences and/or consultations between the patient, the presenter and the physician are held live over distances via a range of telecom services.

(c) Telemedicine technology and requirements. Telemedicine technology is limited to consultations, psychotherapy, psychiatric diagnostic interview examinations and testing, discharge planning and pharmacologic management. An interactive telecommunications system is required as a condition of the use of telemedicine.

(d) The following shall not be considered telemedicine:
   (1) Telephone conversation (including text messaging)
   (2) Electronic mail message
   (3) Facsimile (fax)
   (4) Store and forward

(e) Telemedicine network and duties.
   (1) Interactive audio and video telecommunications must be used, permitting real-time communication between the distant site physician and the patient receiving mental health care services.

   (2) All physicians and health care professionals must be licensed or certified in Oklahoma.

   (3) The telemedicine equipment and transmission speed must be technically sufficient to support the service provided. If a peripheral diagnostic scope is required to assess the patient, it must provide adequate resolution and audio quality for decision making substantially equivalent to a face-to-face encounter. Staff involved in the telemedicine visit need to be
trained in the use of the telemedicine equipment and competent in its operation.

(4) A licensed or certified health care professional at the originating site is required to present the patient to the physician at the distant site.

(5) The physician who has the ultimate responsibility for the care of the patient must obtain written consent from the patient, in accordance with state law, that states they agree to participate in telemedicine. The consent form must include a description of the risks, benefits and consequences of telemedicine and be included in the patient’s medical record.

(6) The patient retains the right to withdraw at any time.

(7) All existing confidentiality protections apply.

(8) The patient has access to all transmitted medical information, with the exception of live interaction video as there is often no stored data in such encounters.

(9) There will be no dissemination of any patient images or information to other entities without written consent from the patient unless otherwise permitted or required by state or federal law.

(10) Physicians providing mental health care services via telemedicine shall be held to the same standards of care as required in the medical community. A significant component of this standard of care includes timely medical evaluations for physical illness, or referrals for such medical evaluations, based on the professional judgment of the physician providing telemedicine services.

(f) **Telemedicine Network Standards.** An appropriate telemedicine network shall meet all technical and confidentiality standards as required by state and federal law in order to ensure the highest quality of care.

Adopted by the Oklahoma Medical Board 9/18/2008