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**Health Systems Division, Problem Gambling Services**

# Telehealth Counseling Policy Statement/Guidelines

*Updated March 17, 2020*

The widespread use of electronic forms of communication has permeated many aspects of our daily lives. Electronic communication has replaced face-to-face conversations, meetings and conference and we now use electronic communications to shop, conduct business and attend to financial obligations. More recently, the use of electronic forms of communications to seek and receive medical treatment has become more common. Administering treatment electronically is relatively new, but experts predict that its use will increase readily over the next decade.

This policy does not supersede current Oregon Administrative Rule 309-019-0170 regarding problem gambling telephone counseling.

As we continue to move forward in the information age, offering alternatives to traditional face-to-face counseling sessions is necessary to meet the needs of the community. Telehealth counseling may be an effective and viable option for individuals that encounter barriers to attending traditional face-to-face counseling. Experts have identified specific groups of populations in which telehealth counseling may be suitable: persons in remote locations, underserved populations and adolescent and young adults.

**Why Use Telehealth Counseling:**

* Confidentiality
* Anonymity
* Convenience
* Cost reduction
* Increase accessibility
* Increase retention
* Increase treatment options
* Increase utilization
* Outreach to younger and tech savvy population

This document has been designed to guide programs in the development and implementation of problem gambling treatment services using telehealth counseling. Please review the following guidelines for participating in telehealth counseling.

**Technology:**

There are numerous avenues of technology that could be used for telehealth counseling. Whatever technology your agency prefers to use, please confirm that the technology your agency chooses meets HIPAA and 42CFR requirements and is a video conferencing technology.

**Equipment:**

Programs can use problem gambling flexible funding to purchase any necessary equipment, such as webcams, new computers, routers, or other equipment that is required to meet confidentiality requirements or to provide efficient telehealth counseling.

**Client Eligibility:**

Currently enrolled or new problem gambling clients and family members are eligible to participate.

The International Society for Mental Health Online (ISMHO) recommends that an initial face-to-face meeting be held for assessment purposes and to determine the appropriateness of online counseling for the individual’s condition (Alleman, 2002, Stofle, 2004). Without an initial face-to-face assessment, misdiagnosis or inaccurate assessment is possible.

SAMHSA (2009) states that the following individuals would not be appropriate for online counseling:

* Individuals with suicidality
* Individuals diagnosed with borderline personality disorder
* Individuals with difficulty distinguishing reality from non-reality
* Conditions that require face-to-face meetings for diagnosis

Problem Gambling Services recommends that the above recommendations are followed.

**Enrollment:**

Complete the all GPMS forms as normal, along with normal releases and informed consent.

**Billing:**

Use billing code G5000 Gambling Treatment Individual Counseling, other technologies at the reimbursement rate of $26.60 (2020) per 15-minute unit.

**Client Protections:**

Agencies participating in telehealth counseling must adhere to the Oregon Administrative Rules OAR 309-019-0170, Outpatient Problem Gambling Treatment Services related to telephone counseling.

* Individual must be currently enrolled in the problem gambling treatment program;
* Telehealth counseling must be provided by a qualified program staff within their scope of practice;
* Service Notes for telehealth counseling must follow the same criteria as face-to-face counseling and identify the session was conducted by electronic means and the clinical rationale for the electronic session;
* Telehealth counseling must meet HIPAA and 42 CFR standards for privacy;
* There must be an agreement of informed consent for telehealth counseling that is discussed with the individual and documented in the individual’s service record; and
* Agency policies and procedures are in place to prevent a breach in privacy or exposure of client health information or records (whether oral or recorded in any form or medium) to unauthorized persons;

Additional considerations regarding client protections when participating in telehealth counseling, includes:

* Treatment process and procedures, including reasons for discontinuing telehealth counseling for an individual
* Individual privacy regulations and client confidentiality needs
* Informed consent
	+ Risks and benefits of telehealth counseling
	+ Actions to prevent risk to the individual
	+ Procedures for emergency
* Providing for clients in case of emergency

**Documentation:**

Agencies will comply with OAR 309-019-0100 regarding documentation. The Individual Service Note must indicate that the session was conducted using “electronic technology”.

**Evaluation:**

Individual’s participating in telehealth counseling will complete the usual and customary PGS satisfaction surveys.

**References:**

* Alleman, J.R. (2002). Online counseling: The internet and mental health treatment. Psychotherapy: Theory, Research, Practice, Training, 39, 199-209.
* Center for Substance Abuse Treatment (2009). Considerations for the Provision of E-Therapy. HHS Publication. No. (SMA) 09-04450.
* Monaghan, S. & Blaszczynski, A. (2009). Internet-based interventions for the treatment of problem gambling. Toronto: Centre for Addiction and Mental Health.

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