



**Marinette County  
HEALTH AND HUMAN SERVICES**

2500 Hall Avenue - Suite A  
Marinette, WI 54143-1604  
Voice (715) 732-7760 FAX (715) 732-7711  
Toll Free: 1-888-732-7549

**Internet: [www.marinettecounty.com](http://www.marinettecounty.com)**

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## **Consent for Telehealth Services During the Covid-19 Pandemic**

Telehealth service is the delivery of healthcare services through the use of various technologies when the therapist, AODA counselor, or psychiatrist are not in the same physical location as the client. The benefit of this service is it allows clients to continue to receive mental health and AODA services when in-office appointments are not possible.

Due to the Covid-19 pandemic, the state of WI, and many insurance companies, are temporarily allowing behavioral health services to be provided through expanded telehealth services not ordinarily allowable. These avenues include audio-only phone communication or any non-public facing remote communication available to the client (i.e., Face-Time and Zoom as well as secure platforms such as paid Zoom accounts and Doxy.me to name a few). These communication avenues are currently allowed for the purposes of providing counseling and psychiatric services during the pandemic when face-to-face contact is not possible. These altered policies will only be in effect during the public health emergency declared by the State of Wisconsin.

### **Information on Telehealth Sessions**

- You will need to use a phone, computer/table with webcam, or smartphone during the session.
- It is important to be in a quiet, private space, in your own residence, that is free of all distractions during the session. You are responsible for preserving your privacy and limit the risk of being over-heard by a third party. It is recommended you conduct the session in a private room with closed doors, with reasonable sound barriers, and no one else present or observing.
- It is expected your session will have your full attention and you will not be distracted by other activities or people/children during your session.
- It is important to use a secure internet connection rather than public/free Wi-Fi. Data plans/phone minutes will apply. Zoom applications do require you download the app.
- It is important to be on time. If you need to cancel or change your telehealth-appointment, you must notify your Adapt by phone, in advance of your scheduled time, preferably with at least 24 hours notice. Clinic policies regarding late or failed appointments (including possible associated fees) still apply.
- We are in need of a valid phone number to reach you in the event of any technical difficulties (to restart the session, to reschedule the session, to attempt another method, etc.).
- If you are not an adult or have a guardian, we need the permission of your parent or legal guardian (and their contact information) for you to participate in telehealth sessions.
- Your provider may determine that due to certain circumstances, telehealth is no longer appropriate and that we should resume our session's in-person when available. Crisis services remain available.

### **Consent**

**You have the right to opt in or opt out of telehealth communication at any time, without affecting your right to future care or treatment, except during the COVID 19 pandemic when in-person sessions will not be available for an undetermined length of time. Please discuss this thoroughly with your therapist.**

**Confidentiality**

- The same laws protecting the confidentiality of your personal health information, as well as the clinical record of your session, apply to telehealth services just as they do in the office.
- Please note no electronic transmission system is considered completely safe from intrusion. Interception of communication by third parties remains technically possible. You are responsible for information security on your own computer, laptop, tablet, or smartphone.
- Rules regarding mandatory reporting of abuse or imminent harm to self or others also apply.
- The client and therapist both agree to not record the telehealth sessions without prior written consent.

**Video Conferencing (if applicable)**

At the time of the telehealth appointment, it is your responsibility to have your electronic device on, video conferencing software launched and be ready to start the session at the time of the scheduled telehealth appointment. This requires setting up, a few minutes prior to each start time for video conferencing. The client is responsible for his/her own hardware and software, audio and video peripherals, and connectivity and bandwidth considerations. If a video telehealth session is disrupted, after reasonable attempts, we may have to reschedule the session or switch to a phone call to discuss next steps. For phone conferencing, you are expected to be ready to answer your phone at your scheduled appointment time.

**By signing this form, you certify:**

- That you have read or had this form explained to you; you understand the risks and benefits of telehealth (both video and phone only) services
- You have been informed of and accept the potential risks associated with telehealth, such as failure of security protocols that may cause a breach of privacy of personal and/or medical information
- That the financial billing of your telehealth therapy/psychiatric session will be the same as an in-office appointment.
- That you have been given ample opportunity to ask questions and that any questions have been answered to your satisfaction.

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Client/Parent/Guardian Printed Name

Client/Parent/Guardian Signature

Date

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If this consent is in reference to a child or adult under guardianship, please indicate the name of the child/protected adult

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Email Address

Physical Address from which I will be communicating privately for Telehealth Sessions:

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Street Address

City/State

Zip Code

Phone number

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Name of person obtaining verbal consent, if applicable, until written consent is obtained  
(Verbal consent is valid for up to 10 business days due to current emergency circumstances)

Date

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