Questions Asked During the Live Webinar Broadcast on 4/17/14

Q: Did I understand you to say that Gmail is HIPAA compliant?

A. In order to use Gmail, Google Drive or Google Cloud – you must enter into a Business Associate Agreement with Google. A business associate is someone (like Google) who works alongside a covered entity (HIPAA covered entity – you) but does not directly work for that covered entity. An entity can use Gmail and Google cloud services if they sign a Business Associate Agreement (BAA) with Google. Some links that explain this in greater detail include:

- [http://healthitsecurity.com/2013/10/03/google-lays-out-new-hipaa-compliant-baa-terms/](http://healthitsecurity.com/2013/10/03/google-lays-out-new-hipaa-compliant-baa-terms/)
- [https://support.google.com/a/answer/3407054?hl=en](https://support.google.com/a/answer/3407054?hl=en)

The suggestion is that you contact Google to initiate this conversation about how to enter into a BAA with them. You must be the administrator for your entity so that is something to explore with Google. Once set up – this is very secure according to health IT experts.

Q: How does 42CFR Part 2 impact this?

A. 42CFR Part 2 defines your ability to share information that you have learned about a client with another person (doctor, clinician, family member, probation, etc.). Under 42CFR Part 2, you cannot disclose any information about your client without signed and dated releases. That still applies here; the use of technology for the delivery of services does not nullify your need to adhere to HIPAA or 42CFR Part 2. All releases must be signed by your client and the burden is on you to make sure that those signatures are the client’s signatures.

Q: How does the counselor observe and access congruity of affect and verbalizations in non-face-to-face sessions?

A. The burden is on the clinician to determine congruity of affect and verbalizations in non-face-to-face sessions. This is where “meeting the client” in person (at least once but periodically is more advantageous) can help so that you have a baseline to work with and to determine if they are a good candidate for non-face-to-face sessions. Also, your video sessions may help, however, you can only see part of their body and not their whole body.

Q: Will you provide a list of HIPPA compliant technologies for practicing telehealth?

A. The best resources to guide you as you research HIPAA-compliant technologies include:

- [http://vsee.com/hipaa](http://vsee.com/hipaa)
Q: I am licensed and practice in PA with many NJ clients traveling to me. I am not licensed in the state where the clients live. According to your wording, I am not in compliance. Should your wording change or should I?

A. If clients are traveling to your office for live services, e-technology concerns are not an issue. If the clients live in NJ and you are in PA and you are providing them with services in NJ via e-technology, you need to know the rules for practicing in NJ and practicing e-therapy in NJ, as well as the rules for both in PA.

Q: I couldn't find the link to the informed consent/disclosures that were referenced. Please advise.

A: Documents are attached.

Q: Is it best to make the technical training available at or soon after a client has been assessed?

A. You will assess whether a client is a candidate for e-therapy during your initial intake and assessments. Once you determine that they are a suitable candidate for using e-technologies, then you can begin training. Not all clients are suitable candidates, and you may determine that during training in ways you were not able to ascertain during intake and assessment. In that case, you need to have a more thorough discussion about issues, concerns, and potential remedies.