

From: [Carrie Tellefson](#)
To: [Beyer, Jane \(OIC\)](#)
Cc: [Crystal Chindavongsa](#)
Subject: Fwd: Telemedicine disclosures per your request
Date: Monday, July 12, 2021 2:27:03 PM
Attachments: [RAV Discalimers Cost.docx](#)

External Email

Hi Jane - during the legislative session, Rep Riccelli asked Teladoc Health to provide examples of patient disclosures it uses on its site. Attached below is some of that information. I will also send you the scope that is read to them when it's audio only.

Please let me know if there's anything that we can provide to assist you in this process.

Kind regards,

Carrie

Carrie Tellefson, JD, President
Sound Government Solutions
3110 Ruston Way, Suite F
Tacoma, WA 98402
253-576-9908 (cell)
www.sound-gov.com

Begin forwarded message:

From: Carrie Tellefson <carrie@sound-gov.com>
Subject: Telemedicine disclosures per your request
Date: February 17, 2021 at 9:13:18 AM PST
To: Marcus Riccelli <marcus.riccelli@leg.wa.gov>
Cc: "Peterson, Kylie" <kylie.peterson@leg.wa.gov>, Mary Clogston <mary.clogston@leg.wa.gov>

Hi Rep Riccelli - attached is a document showing the disclosures that Teladoc uses on its platform. We are also working on getting ahold of the script that is used when patients call into our call center to be connected to a practitioner, using just their telephone. There are disclosures that are read to them. Unfortunately the call center is in Texas and they are in the middle of the big snow/ice situation so we are delayed in getting that information. I will get it to you as soon as I have it.

Please let me know if you have additional questions. I'm also happy to get someone on the phone from Teladoc to talk through some of this with you.

Kind regards,

Carrie

Carrie Tellefson, JD, President
Sound Government Solutions
3110 Ruston Way, Suite F
Tacoma, WA 98402
253-576-9908 (cell)
www.sound-gov.com

Displaying cost / charges to members requesting a visit

Website:

TELADOC.

1. Visit details ▶ 2. Billing information ▶ 3. Review & submit

Confirm billing information

*All fields are required unless otherwise noted.

Your total visit fee is \$0.00.

Previous Continue

TELADOC.

1. Visit details ▶ 2. Billing information ▶

Review & submit

My Visit Details

Edit

Patient	LAURA WYATT
Contact Number	Primary Phone +1 (203) 722-0823
Visit Alternative	Primary Care Physician
Visit Location	Connecticut, United States Of America
Visit Type	General Medical
Visit Method	Phone
Visit Mode	Scheduled
Time zone	America/New_York
Requested Date:	02/18/2021
Requested Time:	10:30 AM EST
Pharmacy	Grieb's Pharmacy 1021 Post Rd Darien, CT 06820

Web and Mobile Informed Consent

Today you are requesting Teladoc's telemedicine services ("Services"). Telemedicine is the practice of medicine that involves the use of electronic communications to diagnose or treat patients who are in different locations from their healthcare providers. Telemedicine can be used for diagnosing, treating, and prescribing medication.

When using the Services, you will be treated by and will enter into a clinician-patient relationship with a physician of Teladoc Physicians, P.A. or a psychologist/psychiatrist of Teladoc Mental Health, P.A. ("Teladoc Clinician") who is licensed in your state. Teladoc, Inc. does not provide the Services; it performs administrative, payment, and

I understand the statements above and consent, on my own behalf or on behalf of my minor dependents, to receive Services by a Teladoc Clinician.

I understand that I may access **Teladoc's Notice of Privacy Practices** and acknowledge that I have been provided access to such Notice of Privacy Practices.

(Optional) I agree to the release of my medication history, if available, for review by a clinician or provider for this visit.

Disclaimer: If you have a medical emergency, dial 911 immediately or go to your nearest emergency room.

Previous Continue

Mobile app:

9:27 9:27

Kinsa Smart... Kinsa Smart...

Great! Please review your details and submit

Name
OPEYEMI OLUWOLE-SOWORE

Time Zone
America/New_York

Appointment Time
As soon as possible

State
New Jersey

Type of visit
General Medical

Method
Phone

Contact number
(917) 304-0676

Pharmacy
CVS/pharmacy #0814
DUMONT, NJ 07628
(201) 385-8883

Today's visit will cost
\$0.00

Without virtual care, where would you have gone to seek care?

I understand the **Informed Consent Agreement** and consent, on my own behalf or on behalf of my minor dependents, to receive Services by a Teladoc Clinician.

I understand that I may access Teladoc's **Notice of Privacy Practices** and acknowledge that I have been provided access to such Notice of Privacy Practices.

(Optional) I agree to the release of my medication history, if available, for review by a clinician or provider for this visit.

CONFIRM

START OVER

Web and Mobile Informed Consent:

Today you are requesting Teladoc's telemedicine services ("Services"). Telemedicine is the practice of medicine that involves the use of electronic communications to diagnose or treat patients who are in different locations from their healthcare providers. Telemedicine can be used for diagnosing, treating, and prescribing medication.

When using the Services, you will be treated by and will enter into a clinician-patient relationship with a physician of Teladoc Physicians, P.A. or a psychologist/psychiatrist of Teladoc Behavioral Health, P.A. ("Teladoc Clinician") who is licensed in your state. Teladoc, Inc. does not provide the Services; it performs administrative, payment, and other activities for Teladoc Clinicians in support of the Services they provide to you.

Responsibility for your comprehensive care shall always remain with your local clinician or primary care physician.

The expected benefits of using telemedicine include:

- Improved and quicker access to medical care through reduced travel and visit time
- Ability to access care from any location, and
- More efficient medical evaluation and management

The potential risks associated with using telemedicine may include:

- Delays in medical evaluation and treatment due to failures of technology, such as a disconnected phone call
- Information may be lost due to technical failures, and
- In rare cases, a lack of access to complete medical information may result in adverse drug interactions, allergic reactions, or other judgment errors.

The inability to have direct, physical contact with your healthcare provider is the primary difference between telemedicine and in-person health care. The alternative to telemedicine is receiving care in a traditional in-person care setting.

In receiving the Telemedicine Services you understand and agree:

1. It is necessary for you to provide complete and accurate medical history and you will update your medical health records periodically, but no less than once a year.
2. You cannot use Teladoc's Telemedicine Services to get prescriptions for DEA controlled substances, non-therapeutic drugs and certain other drugs which may be harmful because of their potential for abuse.
3. You cannot use Teladoc's Telemedicine Services for life threatening emergencies. If you think you are experiencing a medical emergency, you need to call 911 or go immediately to the closest emergency room.
4. There is no guarantee that you will be treated by a Teladoc Clinician. The Teladoc Clinicians reserve the right to deny care for potential misuse of Services or for any other reason if, in the professional judgment of the Teladoc Clinician, the provision of the Service is not medically or ethically appropriate.
5. There is no guarantee that you will be given a prescription by the Teladoc Clinician.
6. You are required to pay all visit fees at the time you schedule a visit, unless payment arrangements have been established through your employer, benefit provider or other entity.

Your use of this Service is voluntary and you have the right to withdraw your consent to the Services at any time by ending this session. If you choose to end your session, your right to future Telemedicine Services will not be affected.

Notice of Privacy Practices

Links to webpage: <https://www.teladoc.com/notice-of-privacy-practices/>

Notice of privacy practices

This notice describes how medical information about you may be used and disclosed and how you can get access to this information. Please review it carefully.

Teladoc's Commitment to Your Privacy

Teladoc is dedicated to maintaining the privacy of your protected health information ('PHI'). PHI is information about you that may be used to identify you (such as your name, social security number or address), and that relates to (a) your past, present or future physical or mental health or condition, (b) the provision of healthcare to you, or (c) your past, present, or future payment for the provision of healthcare. In conducting its business, Teladoc will receive and create records containing your PHI. Teladoc is required by law to maintain the privacy of your PHI and to provide you with notice of its legal duties and privacy practices with respect to your PHI.

Teladoc must abide by the terms of this Notice while it is in effect. This current Notice takes effect on July 28, 2020, and will remain in effect until Teladoc replaces it. Teladoc reserves the right to change the terms of this Notice at any time, as long as the changes are in compliance with applicable law. If Teladoc changes the terms of this Notice, the new terms will apply to all PHI that it maintains, including PHI that was created or received before such changes were made. If Teladoc changes this Notice, it will post the new Notice on its Web site and will make the new Notice available upon request.

Uses and Disclosures of PHI

Teladoc may use and disclose your PHI in the following ways:

- **Treatment, Payment and Healthcare Operations.** Teladoc is permitted to use and disclose your PHI for purposes of (a) treatment, (b) payment and (c) healthcare operations. For example:
 - **Treatment.** Teladoc may disclose your PHI to another physician or healthcare provider for purposes of a visit or in connection with the provision of follow-up treatment.
 - **Payment.** Teladoc may use and disclose your PHI to your health insurer or health plan in connection with the processing and payment of claims and other charges.
 - **Healthcare Operations.** Teladoc may use and disclose your PHI in connection with its healthcare operations, such as providing customer services and conducting quality review assessments. Teladoc may engage third parties to provide various services for Teladoc. If any such third party must have access to your PHI in order to perform its

services, Teladoc will require that third party to enter an agreement that binds the third party to the use and disclosure restrictions outlined in this Notice.

- **Authorization.** Teladoc is permitted to use and disclose your PHI upon your written authorization, to the extent such use or disclosure is consistent with your authorization. You may revoke any such authorization at any time. To authorize Teladoc to disclose your PHI to a third party, download the HIPAA Authorization to Disclose Protected Health Information [here](#) and mail it to the address listed on the form.
- **As Required by Law.** Teladoc may use and disclose your PHI to the extent required by law.

Special Circumstances

The following categories describe unique circumstances in which Teladoc may use or disclose your PHI:

- **Public Health Activities.** Teladoc may disclose your PHI to public health authorities or other governmental authorities for purposes including preventing and controlling disease, reporting child abuse or neglect, reporting domestic violence and reporting to the Food and Drug Administration regarding the quality, safety and effectiveness of a regulated product or activity. Teladoc may, in certain circumstances disclose PHI to persons who have been exposed to a communicable disease or may otherwise be at risk of contracting or spreading a disease or condition.
- **Workers' Compensation.** Teladoc may disclose your PHI as authorized by, and to the extent necessary to comply with, workers' compensation programs and other similar programs relating to work-related illnesses or injuries.
- **Health Oversight Activities.** Teladoc may disclose your PHI to a health oversight agency for authorized activities such as audits, investigations, inspections, licensing and disciplinary actions relating to the healthcare system or government benefit programs.
- **Judicial and Administrative Proceedings.** Teladoc may disclose your PHI, in certain circumstances, as permitted by applicable law, in response to an order from a court or administrative agency, or in response to a subpoena or discovery request.
- **Law Enforcement.** Teladoc may, under certain circumstances, disclose your PHI to a law enforcement official, such as for purposes of identifying or locating a suspect, fugitive, material witness or missing person.
- **Decedents.** Teladoc may, under certain circumstances, disclose PHI to coroners, medical examiners and funeral directors for purposes such as identification, determining the cause of death and fulfilling duties relating to decedents.
- **Organ Procurement.** Teladoc may, under certain circumstances, use or disclose PHI for the purposes of organ donation and transplantation.
- **Research.** Teladoc may, under certain circumstances, use or disclose PHI that is necessary for research purposes.
- **Threat to Health or Safety.** Teladoc may, under certain circumstances, use or disclose PHI if necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public.
- **Specialized Government Functions.** Teladoc, may in certain situations, use and disclose PHI of persons who are, or were, in the Armed Forces for purposes such as ensuring proper execution of a military mission or determining entitlement to benefits. Teladoc may also disclose PHI to federal officials for intelligence and national security purposes.

Your Rights Regarding Your PHI

You have the following rights regarding the PHI maintained by Teladoc:

- **Confidential Communication.** You have the right to receive confidential communications of your PHI. You may request that Teladoc communicate with you through alternate means or at an alternate location, and Teladoc will accommodate your reasonable requests. You must submit your request in writing to Teladoc. To submit such a request, download the Request for Restricts Request Form [here](#) and mail it to the address listed on the form.
- **Restrictions.** You have the right to request restrictions on certain uses and disclosures of PHI for treatment, payment or healthcare operations. You also have the right to request that Teladoc restrict its disclosures of PHI to only certain individuals involved in your care or the payment of your care. You must submit your request in writing to Teladoc. Teladoc is not required to comply with your request. However, if Teladoc agrees to comply with your request, it will be bound by such agreement, except when otherwise required by law or in the event of an emergency. To submit such a request, download the Request for Restricts Request Form [here](#) and mail it to the address listed on the form.
- **Inspection and Copies.** You have the right to inspect and copy your PHI. You must submit your request in writing to Teladoc. Teladoc may impose a fee for the costs of copying, mailing, labor and supplies associated with your request. Teladoc may deny your request to inspect and/or copy your PHI in certain limited circumstances. If that occurs, Teladoc will inform you of the reason for the denial, and you may request a review of the denial. To request access to your PHI that is not already accessible to you in the Member Portal, download the Request to Access PHI Form [here](#) and mail it to the address listed on the form.

- **Amendment.** You have a right to request that Teladoc amend your PHI if you believe it is incorrect or incomplete, and you may request an amendment for as long as the information is maintained by Teladoc. You must submit your request in writing to Teladoc and provide a reason to support the requested amendment. Teladoc may, under certain circumstances, deny your request by sending you a written notice of denial. If Teladoc denies your request, you will be permitted to submit a statement of disagreement for inclusion in your records. To make a request to amend PHI that you cannot otherwise change yourself through the Member Portal, download the Request to Amend PHI form [here](#) and mail it to the address listed on the form.
- **Accounting of Disclosures.** You have a right to receive an accounting of all disclosures Teladoc has made of your PHI. However, that right does not include disclosures made for treatment, payment or healthcare operations, disclosures made to you about your treatment, disclosures made pursuant to an authorization, and certain other disclosures. You must submit your request in writing to Teladoc and you must specify the time period involved (which must be for a period of time less than six years from the date of the disclosure). Your first accounting will be free of charge. However, Teladoc may charge you for the costs involved in fulfilling any additional request made within a period of 12 months. Teladoc will inform you of such costs in advance, so that you may withdraw or modify your request to save costs. To make a request for an accounting of disclosures, download the Request for an Account of Disclosures Form [here](#) and mail it to the address listed on the form.
- **Breach Notification.** You have the right to be notified in the event that Teladoc (or a Teladoc Business Associate) discovers a breach of unsecured PHI.
- **Paper Copy.** You have the right to obtain a paper copy of this Notice from Teladoc at any time upon request. To obtain a paper copy of this notice, please contact the Privacy Officer by writing to: Privacy Officer, Teladoc Health, 1250 Hancock Street, Suite 501N, Quincy MA 02169 or sending an email to privacy@teladochealth.com.
- **Complaint.** You may complain to Teladoc and to the Secretary of the Department of Health and Human Services if you believe that your privacy rights have been violated. To file a complaint with Teladoc, you must submit a statement in writing to: Privacy Officer, Teladoc Health, 1250 Hancock Street, Suite 501N, Quincy MA 02169 or sending an email to privacy@teladochealth.com. Teladoc will not retaliate against you for filing a complaint.
- **Further Information.** If you would like more information about your privacy rights, please send an email to the Privacy Officer at privacy@teladochealth.com.