

## ANCHORAGE NEUROSURGICAL ASSOCIATES, INC.

## **Telemedicine Informed Consent**

Virtual meetings via audiovisual platforms, commonly known as telemedicine, is becoming increasingly popular as a way for doctors to meet with patients. At Anchorage Neurosurgical Associates, Inc. we utilize telemedicine to meet with patients for a variety of reasons.

- I consent to the use of telemedicine for evaluation and treatment planning for my medical condition(s).
  I understand that my provider will contact me using a video platform, such as Zoom, and that I do have the option to conduct my visit over the telephone only or opt out of telehealth visits entirely.
- 2. I understand that while both Medicare and Medicaid as well as many private insurance companies are increasingly promising to reimburse my healthcare providers for telemedicine visits at the same rate as normal in-person visits, I remain ultimately responsible for the payment of my healthcare bills, not limited to co-pays, deductibles, etc. that may apply, as per the financial policy agreement that I have signed with ANAI.
- 3. I agree to conduct my telemedicine visit in a private, non-public secure area to maximize the security of my personal health information. I will also notify the provider of anyone else in the room with me during my telehealth visit. I understand that while the U.S. DHHS's Office of Civil Rights has waived the usual Health Insurance Portability and Accountability Act (HIPAA) and Health Information Technology for Economic and Clinical Health (HITECH) Act requirements for telemedicine and personal health information security during the COVID-19 Public Health Emergency, ANAI is working to establish and maintain the highest possible telemedicine security. There is still the possibility of a security breach with data/personal health information leak and I agree to indemnify and hold harmless ANAI in the event of such an event.

Patient Signature

Date

Patient Printed Name

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