

MPS NEWS

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February 2018

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Deadline for articles is the 15th of the month preceding publication. Please email heidi@mdpsych.org.

MPS News Design & Layout
Meagan Floyd

The next MPS Council meeting will be held at 8 PM Tuesday, February 13 in the MPS office

President's Column

The Legislative Session Begins

One of the most important benefits of MPS membership is the strong work of our Legislative Committee. We have one of the -- if not the -- most active legislative committee of any District Branch. Over the past several years, we have streamlined our procedures for maximum effectiveness vis a vis the Maryland General Assembly. After 5 years of outstanding collaboration with Philip Cronin, we have a new lobbying representative from Harris Jones & Malone, Tommy Tompsett, who is vigorously addressing our concerns and protecting our interests.

The 2018 Maryland General Assembly session began on January 10th with more than 400 bills filed in the first week. The Legislative Committee had our first conference call on January 17. We have so far reviewed bills related to mandatory reporting of child abuse, criminalization of failure to report child abuse, involuntary admission procedures, and hospital transfers of incompetent criminal defendants. [See [page 5](#) for details.] Fortunately, we do not believe physician assisted suicide will be an issue this session. The committee is coordinating closely with Med Chi to address these issues.

By the time this issue of the newsletter has been published, we will have met with and educated key legislators in Annapolis on January 25, our annual Advocacy Day. Please see the brief recap at the right; more details will follow.

We are looking forward to a vibrant and productive session.

Jennifer T. Palmer, M.D.

2018 MPS Advocacy Day Recap

On January 25th, 11 MPS members, along with staff and representatives from our lobbying firm, spent the day in Annapolis and met with 18 Delegates and 13 Senators. We discussed issues of critical importance to the practice of psychiatry (child abuse reporting, jail transfers, funding for mental health, etc.) and also helped to better acquaint legislators with the MPS. It was a very successful and enriching day.

We'd love to have more of our members at this great event next session!

Behavioral Health Coalition Rally February 22

The Maryland Behavioral Health Coalition will hold a rally at noon at Lawyers Mall in Annapolis (across from the State House) on Thursday February 22. Given that Governor Hogan's FY19 budget proposal does not fund community behavioral health services to the extent required by the 2017 HOPE Act, a good turnout is more important than ever. The Coalition issued a media statement when news of the underfunding broke. The concerns were covered by multiple media outlets:

[The Washington Post](#)
[AP/U.S. News](#)
[The Daily Record](#)
[Baltimore Sun](#)
[Delmarva Now](#)

In addition, the rally aims to bring attention to the broader [Coalition legislative platform](#). Read more details for the [rally on February 22](#).

Call for 2018 Lifetime of Service Award

In 2000, the MPS Council established the MPS Lifetime of Service Award, which is given annually to a senior MPS member who has shown a consistent, career-long pattern of unwavering dedication, commitment, and leadership to the organization. Other qualities to be considered include significant contributions to the mental health of our community through clinical work, teaching, administration, or research. Further criteria established that the nominees must have APA lifer status and must have made significant contributions to the MPS organization.

Nominations for the 2018 award will be accepted until **noon on March 13** or at the March Council Meeting, when voting will occur. Please email Heidi Bunes with suggestions or call the MPS office at 410-625-0232.

Past MPS Lifetime of Service Award Recipients:

- 2000 Lex Smith, M.D.
- 2001 Thomas Allen, M.D.
- 2002 Jonas Rapoport, M.D.
- 2003 Bruce Hershfield, M.D.
- 2004 Gerald Klee, M.D.
- 2005 John Chapman Urbaitis, M.D.
- 2006 Leon Levin, M.D.
- 2007 Mayer Liebman, M.D.
- 2008 Theodore Feldberg, M.D.
- 2009 Betty Robinson, M.D.
- 2010 Leonard Hertzberg, M.D.
- 2011 William Prescott, M.D.
- 2012 Chester Schmidt, M.D.
- 2013 Steve Sharfstein, M.D.
- 2014 Paul McClelland, M.D.
- 2015 Thomas Lynch, M.D.
- 2016 Irvin Cohen, M.D.
- 2017 Robert Roca, M.D.

Congratulations!

The members below achieved Life status this year:

- Scott Aaronson, M.D.
- Allan Anderson, M.D.
- Patricia Assan, M.D.
- Charles Hong, M.D.
- Jeffrey Lafferman, M.D.
- Helen Lann, M.D.
- Merle McCann, M.D.
- Charles Oseroff, M.D.
- Annelle Primm, M.D.
- Jill RachBeisel, M.D.
- Stephen Siebert, M.D.
- Brian Siegel, M.D.
- Susan Wait, M.D.
- Carol Watkins, M.D.
- Aurelio Zerla, M.D.

MPS Members Out & About

Steve Crawford, M.D. contributed to the January 2018 article, "[The Pressure to be Perfect](#)," in *Baltimore Magazine*, explaining why eating disorders are more prevalent.

Steve Sharfstein, M.D. participated in a [discussion on WBAL-TV 11](#) with Crista Taylor of Behavioral Health System Baltimore and Imamu Baraka about support for individuals with mental health needs.

Help us spotlight news of MPS members in the community by sending info to mpps@mdpsych.org.

Poster Contest for Residents & Fellows

For the first time, the MPS will run a poster competition for our Resident-Fellow Members. The winner will receive a cash prize of \$200! The top three finalists will present their posters at the MPS annual meeting Thursday evening April 26th at The Johns Hopkins Club in Baltimore – and will receive a free ticket to the event. Please [click here](#) for more information. **The deadline has been extended to February 10.** Electronic copies of posters are due **February 20**. For more information, or to apply please [click here](#).

Hanson and Miller Receive APA Ethics Award

Last month, the APA Ethics Committee announced that **Drs. Dinah Miller and Anne Hanson** will receive the APA's Carol Davis Ethics Award for their book, *Committed: The Battle Over Involuntary Psychiatric Care*. The book addresses one of the thorniest ethical issues in psychiatry, and indeed, in society at large - the question of involuntary commitment to psychiatric hospitals and to mandated outpatient treatment. Our ethical principles, as APA members, require us to adhere to ideals that may at times seem to come into conflict: respecting the rights of patients, other health professionals, colleagues, safeguarding patient confidences, privacy, and dignity, while providing competent care, and respecting the law. Their book is a valuable companion for thinking through some of the most complex medical - and human - dilemmas.

The [Carol Davis Ethics Award](#) promotes the educational role of the ethics process and is presented to an APA member who has authored an outstanding publication on ethics. The award will be presented at the Annual Meeting Convocation in New York City on May 7.



January 9 Council Highlights

Executive Committee Report

Dr. Palmer noted the passing of Dr. Mickey Kaminsky and invited those present to share memories. She then reported on several MPS efforts since the November Council meeting:

- The Behavioral Health Administration is working on rollout of the PDMP use mandate starting July 1. The MPS will give input to BHA and hold a [training](#) for members this spring.
- A 4-member MPS task force (Pat Triplett, Elias Shaya, Bob Roca and Jill RachBeisel) will schedule a meeting with MedChi CEO Gene Ransom to help determine the MPS role in All-Payer 2.0 [See related article on [page 7](#).]
- Maryland Council of Child Psychiatry President Eileen Nudelman, M.D. is interested in collaborating with the MPS, and will appoint a liaison to the Legislative Committee and the Children's Behavioral Health Coalition.
- The MPS hosted lunches in December for residents at UMD and Hopkins, and received about a dozen new member applications.
- The Suburban Maryland Psychiatric Society retained a separate lobbyist this session. They no longer participate in MPS calls with Harris Jones Malone regarding pending legislation.

Dr. Palmer explained that the APA has requested that DBs offer a group membership discount program, which the APA has piloted for two years in several other states. The APA has an agreement pending with Sheppard Pratt for their participation in the group discount for 2018, but did not disclose specific details to the MPS. She made a motion that the MPS adopt the APA program as described in slides 4 and 5 of the APA presentation. Highlights of the program are:

- Discounts (10-20%) based on number of NEW members (10-150+), which apply to dues for NEW members only when the employer pays membership dues for the entire group
- 10% discount for all members of a small group when one member gets 3 new members
- 10% discount for members who pay 3 years of dues in full up front

During discussion of the motion, concerns included the optics for longtime members, the possibility that new members could potentially have a 10% (or more) lifetime discount, possible gaming to get a discount and whether resident members might somehow be penalized for joining early. The MPS is not required to offer the discount being given by the APA. However, in that case, this program, designed to generate large numbers of new members already in practice (the most difficult to recruit), is likely to be less successful. A plus for current members is

that a larger MPS membership would decrease budget pressure for raising dues in the future. Dr. Palmer agreed to Dr. Nestadt's amendment to her motion specifying a 3-year limit on the discount available to any individual member of a group, which Dr. Waddington seconded. Voting results were 6 in favor, 4 opposed and one abstention, so the motion passed.

Secretary-Treasurer's Report

Dr. McGuire noted that there should be sufficient year-end details by the next meeting to allow discussion regarding the investment fund balance. The emergency reserve continues to significantly exceed the amount required by our policy. Percentages on the advisor's report do not include the separate Capital One savings account, so equities are within the specified limits when that is accounted for. The fund has grown since inception, even after subtracting fees.

Executive Director's Report

Ms. Bunes reported that:

- On the parity front, she and other advocates met in November with several Maryland Insurance Administration officials regarding parity enforcement and network adequacy concerns. She urged MIA to look into payment rates and contracting, which discourage psychiatrists from participating in networks. Parity@10 is a new national campaign being spearheaded in Maryland by Ellen Weber.
- Initiatives to increase non-dues income include an APA Innovative Grant Proposal, but unfortunately that was not funded. Staff met with APA, Inc., the APA-endorsed liability insurer, which may provide some funding for events. Also, certain ad rates increased for 2018, along with the hourly rate charged to related organizations for staff support.

Academic Psychiatry and Resident-Fellow Committees' Report

Dr. Roca announced that there will be a new MPS poster competition for residents this spring in addition to the annual best paper awards. He and the RFM chairs worked with staff to develop requirements and distribute information to trainees. The top three posters will be displayed at the MPS annual dinner April 26. The winner will be announced that evening and receive a \$200 prize.

Dr. Nestadt noted that in addition to the new poster contest, he and Dr. Gallagher are planning a career night for Resident-Fellow Members, particularly PGY-3s, hopefully this spring. The MPS will poll for preferred subspecialties and identify members practicing in those areas to share their experience at a venue in downtown Baltimore.

(Continued on next page)

(Council continued)

Distinguished Fellowship Committee Report

Dr. Ehrenreich announced that the APA approved our nominees for Distinguished Fellow: Drs. Doris Balis and Shauna Reinblatt. The committee has identified a couple of promising candidates and will work again this spring on encouraging eligible members to apply.

Legislative Committee Report

Dr. Hanson reported that the committee is prepared for the beginning of the 90-day session, with weekly meetings starting next week. She noted that there will be a bill to criminalize failure to report current child abuse, and one to mandate training on the obligation to report. Another is expected to address the problem of court-ordered treatment without available beds.

Payor Relations Committee Report

Dr. Gaffney reported that the Insurance Administration's new Network Adequacy Regulations took effect at the end of the year. It is too soon to know whether they will induce insurers to raise payment rates for psychiatric treatment or reduce administrative hassles, both of which would incentivize more psychiatrists to join their networks.

PRMS Highlights Maryland Foundation for Psychiatry

Professional Risk Management Services, Inc. (PRMS) just posted a wonderful piece on its blog noting the many successful initiatives of the Maryland Foundation for Psychiatry. The information is also included in their Twitter and LinkedIn (see links below). PRMS has been a generous donor to the Foundation in addition to this excellent promotion of the significant role that it plays in our state.

[Blog post](#)

[Twitter](#)

[LinkedIn](#)

Latest Public Service Radio Minute

The Maryland Foundation for Psychiatry has recorded a new piece for broadcast on the radio this month: *#MeToo trauma can have long-term mental health consequences*. To listen, [go to the website](#) and click on the file or download a copy.

Maryland is 3rd Worst State for Affordable Behavioral Health Treatment

The [Milliman, Inc. study](#) of disparities in addiction and mental health care versus other medical care (cited in the December issue) got the attention of WMAR-TV 2. [Click here](#) to view the clip where they discuss the problem that Marylanders face when seeking behavioral health care.

Awards for Advancing Minority Mental Health

APA Foundation Awards for Advancing Minority Mental Health recognize psychiatrists, other health professionals, mental health programs and organizations that have undertaken innovative and supportive efforts to raise awareness of mental illness in underserved minority communities and increase access to and improve the quality of mental health services for underserved minorities. **The deadline for nominations is February 9.** [Learn more.](#)

Intercultural Counseling Connection

The MPS Diversity and Public Psychiatry committees will hold a joint meeting on Thursday evening **February 8** in the MPS office. Intercultural Counseling Connection representative Lauren Goodsmith will speak beginning at 7 PM about this network of mental health professionals committed to providing culturally responsive counseling and therapeutic services for asylum seekers, refugees, and other forced migrants in the greater Baltimore area. All MPS members are welcome; please [email Heidi Bunes](#) if you plan to attend.

Eating Disorders Awareness

The theme of this year's National Eating Disorders Awareness Week (February 23 – March 1) is *Let's Get Real*. 30 million Americans will struggle with a full-blown eating disorder and millions more will battle food and body image issues that have untold negative impacts on their lives. Because of stigma and old stereotypes, many people don't get the support they deserve. Join the effort to raise awareness by visiting [this site](#) for ways to get involved.

Renew Your 2018 Membership Now!

If you haven't already, please pay your 2018 dues now. Dues for calendar year 2018 were sent in October. Members who do not either pay MPS and APA dues in full or schedule a payment plan will be dropped as of **March 31**. We want to help members in any way possible to remain in good standing! Please [contact the MPS](#) with questions, or to discuss dues relief options or payment arrangements.

DON'T FORGET!

Maryland News

2018 General Assembly Update

The 2018 Maryland General Assembly is off to a busy start. Members of the MPS Legislative Committee have been hard at work screening bills, writing/providing testimony, sending letters and more on behalf of MPS members. Below is a list of some of the bills where the MPS has taken positions:

Support:

[SB 104](#): Privileged Communications - Critical Incident Stress Management Services

Bill Overview: Prohibiting a critical incident stress management team member from disclosing certain communications or information acquired from a law enforcement officer, a correctional officer, or an emergency responder in the course of providing critical incident stress management services; prohibiting a critical incident stress management team member from being compelled to testify in any judicial or administrative proceeding or any investigation by a governmental unit; establishing certain exceptions; etc.

Oppose:

[HB202/SB361](#): Criminal Procedure - Incompetency and Criminal Responsibility - Court-Ordered Medication

Bill Overview: Authorizing a court to order administration of psychiatric medication to a defendant for a period of no longer than 30 days after a finding of incompetency or not criminally responsible under certain circumstances; providing that certain medication may be administered to a certain individual before the decision of a certain panel for no longer than 30 days under certain circumstances; requiring a certain panel to issue a certain decision within 30 days after a court orders treatment under certain circumstances; etc.

[HB 385](#): Criminal Procedure - Incompetency and Criminal Responsibility

Bill Overview: Requiring a court to determine eligibility for and conditions of pretrial release for a certain defendant in accordance with certain rules at a certain time; requiring the Maryland Department of Health to arrange for admission of a certain defendant to an appropriate facility within 21 days after the date of commitment in accordance with the Health Department's facility and admission policy; etc.

[SB 132](#): Child Abuse and Neglect - Failure to Report

Bill Overview: Establishing that certain persons who are required to provide certain notice or make certain reports of suspected child abuse or neglect may not knowingly fail to give the notice or make the report if the person has actual knowledge of the abuse or neglect or witnesses the act of the abuse or neglect; establishing the misdemeanor of knowing failure to report child abuse or neglect under certain circumstances; and providing certain penalties for a violation of the Act.

[HB 111](#): Maryland Department of Health - Defendants Found Incompetent to Stand Trial or Not Criminally Responsible - Commitment

Bill Overview: Requiring a court to enter a certain commitment order if the court makes a certain finding; requiring the Maryland Department of Health to facilitate the immediate placement of certain defendants in a certain facility on or before a certain date specified in a commitment order and to provide certain notification to the court; establishing a rebuttable presumption of contempt under certain circumstances; providing that a lack of available beds in a certain facility is not sufficient reason for not making a certain placement; etc.

Meagan Floyd, Associate Director

Online CDS Renewal Now Available

In December, the Maryland Department of Health Office of Controlled Substances Administration (OCSA) launched a web-based platform for applicants to renew controlled dangerous substances (CDS) registrations online. The CDS Registration Renewal Service can be accessed at www.egov.maryland.gov/mdh/cds. Applicants can renew their CDS registration up to 60 days before or 30 days after the expiration date listed on the certificate.

More than 39,000 registrants in 35 classifications are required to renew CDS registrations on a three-year cycle. The new renewal platform is expected to reduce processing time with functionality to:

- Connect in real-time to the Board of Physicians to verify applicants have an active professional license with no disciplinary actions/orders
- Connect in real-time to the Prescription Drug Monitoring Program (PDMP) database to verify applicants are registered
- Prompt applicants to upload required documentation
- Automatically display appropriate renewal term and fee based on applicant record
- Process fee-exempt registrations
- Receive renewal payments via major credit or debit card

From [January 29 Business Wire](#)
(Thanks to Erik Roskes, M.D.)

The Maryland Psychiatric Society
presents

Assessing Risk in Psychiatric Practice

Wednesday,
March 21, 2018
6:30 - 9:00PM



2 CME Hours*

MedChi's Osler Hall
1211 Cathedral St
Baltimore, MD 21201

Join us for an educational evening covering two very important topics:

- The first **risk management** course is an interactive audience response lecture allowing you to engage with a risk management specialist to discuss real-life scenarios based on actual calls received by the PRMS risk management helpline. How would you deal with a law enforcement demand for patient records, a "Friend" request from a patient, pharmacist report of prescription alteration or an estranged parent demand for records?
- Next, we'll address **PDMP use**, which is mandated for CDS prescribing effective July 1st. Checking PDMP helps avoid the possibility of dangerous prescribing and adverse outcomes.

Agenda

6:30-7:00PM

Registration, Coffee/Dessert

7:00-8:00

What Would You Do?

8:00-9:00

Maryland's Prescription Drug Monitoring Program (PDMP): Best Practice and Clinical Use

Registration is **\$20.00 for MPS Members** and **\$35.00 for Non-members**.

Fees are non-refundable.

Please send check or money order to:

The Maryland Psychiatric Society
1101 Saint Paul Street
Suite 305
Baltimore, MD 21202

[REGISTER AND PAY ONLINE TODAY!](#)

Objectives

After attending this course, you will be able to:

- Describe the most frequent types of risk management concerns.
- Incorporate into clinical practice two risk management strategies to increase patient safety and reduce professional liability risk.
- Describe the Maryland Prescription Drug Monitoring Program (PDMP).
- Determine when PDMP will be required.
- Summarize what the PDMP query portal looks like.
- Confirm what other states' data can be accessed through the query portal.
- Establish how to use the PDMP as a clinical tool.
- Identify where to find safe opioid prescribing resources.

***Accreditation Statement**

Professional Risk Management Services, Inc. (PRMS, Inc.) is accredited by the Accreditation Council for Continuing Medical Education to provide continuing medical education for physicians.

AMA Credit Designation Statement

Professional Risk Management Services, Inc. (PRMS, Inc.) designates this course for a maximum of 1 *AMA PRA Category 1 Credits*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Accreditation Statement

MedChi, the Maryland State Medical Society is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to provide continuing medical education for physicians.

AMA Credit Designation Statement

MedChi designates this live activity for a maximum of 1 *AMA PRA Category 1 Credits*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

Thank you to our event sponsor:  **PRMS**
Professional Risk Management Services, Inc.

Maryland News

Reminder – Prohibitions on Prior Authorization of Opioid Abuse Drugs

[HB 887](#) Prior Authorization for Drugs to Treat Opioid Use Disorder prohibits carriers that provide coverage for substance use disorder benefits from applying a prior authorization requirement for a prescription drug (1) when used for treatment of an opioid use disorder and (2) that contains methadone, buprenorphine, or naltrexone. This bill applies to all plans issued, delivered, or renewed in the State on or after May 25, 2017.

Companion bills, [HB 1329/SB 967](#), also passed in the 2017 legislative session with a prior authorization prohibition effective January 1, 2018. It prohibits insurers that cover prescription drugs from requiring prior authorization for an opioid antagonist unless there is at least one formulation of the opioid antagonist that can be prescribed without a prior authorization. The [law](#) defines “opioid antagonist” as: (1) naloxone hydrochloride; or (2) any other similarly acting and equally safe drug approved by the federal food and drug administration for the treatment of a drug overdose.

One Year Extension for Maryland’s All-Payer Contract

The federal government has agreed to approve a one-year extension of Maryland's All-Payer health care model for hospitals. The mutually agreed-upon extension will allow the federal government to complete its review and to consider four years of performance, which ended in 2017. Maryland's current All-Payer Hospital Model Contract and its amendments will be extended from an expiration date of December 31, 2018 to December 31, 2019 while the state seeks approval to apply a similar plan to outpatient service providers such as doctors, skilled nurses and rehabilitation centers. [A [Washington Post article](#) includes more details.]

MedChi, The Maryland State Medical Society has been a key partner in the multi-year process to negotiate the new All-Payer agreement. The All-Payer contract, previously known as the Maryland Medicare Waiver, has transformed Maryland's health care payment system by changing the focus from hospital payments to the total cost of care. The longer-term agreement under consideration includes pro-physician protections which were negotiated by the physician community.

*Gene M. Ransom, III, CEO
MedChi, The Maryland State Medical Society*

MedChi Survey of Maryland Physician Compensation

MedChi, The Maryland State Medical Society, is [conducting a survey](#) to serve its mission as Maryland's foremost advocate and resource for physicians and their patients. The survey will examine the salaries, production bonuses, and other recruiting incentives and benefits offered by various types of employers to Maryland physicians across various specialties. Results of this survey are strictly anonymous and will be available to all physicians who participate.

APA News & Information

Free Members Course of the Month

Each month, APA members have free access to an online CME course on a trending topic. The February course is entitled, “Managing Physician Burnout.” Burnout is a syndrome characterized by depersonalization, emotional exhaustion and a sense of low personal accomplishment that leads to decreased effectiveness at work. This presentation addresses burnout among physicians, focusing on psychiatrists at different levels of training, and discusses strategies, methods, and programs to reduce burnout and promote resilience and wellness. Presented by Eva M. Szigethy, M.D., Ph.D. of the University of Pittsburgh. [Click here](#) to access the course and sign up for updates about this free member benefit.

CME on Climate and Disaster Mental Health

APA launched a new CME module that discusses the relationship between a changing climate and mental health and describes the impact of climate-related disasters on vulnerable populations. It also reviews ways to address mental health issues consequent to climate-related disasters in patients. [Click here](#) for details.

Early Bird Registration for APA Annual Meeting ends February 6

Registration for the [APA 2018 Annual Meeting](#) May 5 – 9 in New York City continues. Members get priority registration access plus discounted fees. **The deadline for early bird registration is Tuesday, February 6.**

APA News & Information

APA Applauds CHIP Reauthorization

As part of last month's short-term government funding bill, Congress passed a measure extending funding for the Children's Health Insurance Program (CHIP) for six years, through Fiscal Year 2023. The bill also extends funding for the Childhood Obesity Demonstration Project and the Pediatric Quality Measures Program, and extends specified outreach and enrollment grants. The APA applauded the CHIP extension, which protects children's health coverage and provides access to needed health and mental health services for nearly nine million children and adolescents from low-income families who do not qualify for their state's Medicaid program. This includes an estimated 850,000 CHIP beneficiaries experiencing serious behavioral or emotional disorders. Early access to treatment is critical for children and adolescents facing mental health challenges.

APA Calls for End to 'Arm Chair' Psychiatry

In January, the APA reiterated its continued and unwavering commitment to the ethical principle known as "The Goldwater Rule." It called for an end to psychiatrists providing professional opinions in the media about public figures whom they have not examined, whether it be on cable news appearances, books, or in social media. Arm chair psychiatry or the use of psychiatry as a political tool is the misuse of psychiatry and is unacceptable and unethical. It undermines the credibility and integrity of the profession and the physician-patient relationship. Although APA ethical guidelines can only be enforced against its members, the APA calls on all psychiatrists to abide by this guidance in respect of our patients and our profession. To read the news release, click [here](#). For further information on the Goldwater Rule, go [here](#).

APA Advocacy on Medicaid Work Requirement

APA, along with America's Frontline Physicians, released a statement strongly urging CMS to put patients first and reconsider its willingness to approve state waiver requests that would require patients to work in order to be eligible for Medicaid. These measures would be punitive and detrimental to patient care. Read the joint statement by APA and America's Frontline Physicians on work requirements for Medicaid [here](#).

New APA Practice Guideline on AUD Pharmacotherapy

APA released a new practice guideline for the [pharmacological treatment of alcohol use disorder](#) (AUD). Despite the high prevalence of AUD and its significant public health consequences, patients with this disorder remain undertreated. The guideline aims to increase physician and public knowledge on the effectiveness and risks of the five medications that may be used for the treatment of AUD: acamprosate, disulfiram, gabapentin, naltrexone, and topiramate.

While the guideline focuses specifically on evidence-based pharmacological treatments for AUD, it also includes recommendations and suggestions related to psychiatric evaluation of patients with AUD and developing a person-centered treatment plan. Evidence-based psychotherapeutic treatments for alcohol use disorder also play a major role in treatment and peer support groups such as Alcoholics Anonymous, and other 12-step programs can be helpful for many patients. However, specific recommendations related to these treatments are outside the scope of this guideline.

APA News

- APA welcomed the first-ever report from the Interdepartmental Serious Mental Illness Coordinating Committee (ISMICC), led by Assistant Secretary for Mental Health and Substance Use Elinore McCance-Katz, M.D, Ph.D. The committee was created as part of the 21st Century Cures Act, and is charged with enhancing coordination across federal agencies that impact the care of those with serious mental illness. Learn more about the ISMICC [here](#).

- APA members and staff raised over \$30,000 for disaster relief efforts following hurricanes Harvey, Irma and Maria, and wildfires in California. The APA Foundation will donate \$3000 to CrearConSalud, a nonprofit providing mental health services in Puerto Rico. Read more about the APA Foundation [here](#).

- Reminder—the APA moved to D.C. The new address and telephone number are:

800 Maine Avenue, S.W., Suite 900
Washington, D.C. 20024
Phone (202) 559-3900
Toll-free number is unchanged (888) 357-7924.

Medicare News

Open Payments Website Redesign

The [Open Payments Data](#) website has been enhanced to improve the user experience and provide a more robust search tool. The home page is reformatted with a new look and layout, featuring an updated search bar that allows users to search by physician name, teaching hospital, and reporting entity. The site is fully mobile, accommodating users on smartphones and tablets. Among other changes are the [Facts About Open Payments](#) webpage and a Map Search Feature that allows users to view search results on a map. On January 17, CMS updated the Open Payments dataset to reflect changes since the last publication on June 30, 2017 due to dispute resolutions, etc.

Quality Payment Program Updates

CMS posted lists of approved [Qualified Registries](#) and [Qualified Clinical Data Registries](#) (QCDRs) on the [2018 Resources](#) webpage.

CMS updated the [2018 Resources](#) webpage with information on the measures and activities for each of the four Merit-based Incentive Payment System performance categories:

- [Improvement Activities](#)
- Quality Measures [Specifications](#), [Supporting Documents](#), and [Benchmarks](#)
- [Cost Measures](#)
- [Advancing Care Information Measures and Transition Measures](#)

CMS posted a new [Enterprise Identity Data Management \(EIDM\) User Guide](#), which details how to create an account or role to submit or access data. There is also an [EIDM User Guide](#) for Accountable Care Organizations.

New Data Submission System for Quality Payment Program

CMS has a new data submission system for clinicians participating in the Quality Payment Program. All 2017 Merit-Based Incentive Payment System (MIPS) data can now be submitted through one platform on the [gpp.cms.gov](#) website. Most data can be submitted and updated any time through **March 31**. [Click here](#) for more information.

From January 10 *Psychiatric News Update*

New CMS Bundled Payment Model

On January 9, CMS [announced](#) the launch of a new voluntary bundled payment model called Bundled Payments for Care Improvement Advanced (BPCI Advanced). Under traditional fee-for-service payment, Medicare pays providers for each individual service they perform. Under this bundled payment model, participants can earn additional payment if all expenditures for a beneficiary's episode of care are under a spending target that factors in quality. BPCI Advanced will qualify as an Advanced Alternative Payment Model (Advanced APM) under the Quality Payment Program. BPCI Advanced is an important step in the move away from fee-for-service and toward paying for efficient, high-quality care.

BPCI Advanced seeks participants who are interested in:

- Continuously redesigning and improving care
- Decreasing costs by eliminating care that is unnecessary or provides little benefit to patients
- Encouraging care coordination and fostering quality improvement
- Participating in a payment model that tests extended financial accountability for the outcomes of improved quality and reduced spending
- Creating environments that stimulate rapid development of new evidence-based knowledge
- Increasing the likelihood of better health at lower cost through patient engagement, education, and on-going communication between doctors and patients

The Model Performance Period for BPCI Advanced starts on October 1. For more information, visit the [BPCI Advanced](#) webpage. Applications must be submitted via the [Application Portal](#), which will close on **March 12**.

The APA has posted information about [Alternative Payment Models](#) on its website. Similarly, the AMA has assembled [tools and resources](#) for physicians to use as they navigate the changing payment models.

CMS Behavioral Health Update

In January, CMS added Behavioral Health Integration Services to its [Behavioral Health Specialty page](#). This fact sheet explains billing codes for services that use the Psychiatric Collaborative Care Model as well as codes for services using other models. There is also a separate FAQ document on Behavioral Health Integration Services.

Medicare News

2018 Value Modifier and Payment Adjustment Factor

CMS announced the results of the 2018 Value Modifier and the adjustment factor that will be applied to clinicians receiving an upward payment adjustment. In 2018, over 20,000 clinicians will receive an increase of 6.6% to 19.9% on their Medicare physician fee schedule payments as a result of their high performance on quality and cost measures in 2016. The 2018 [Value Modifier results](#) and the [payment adjustment factor](#) are available on the 2016 QRUR and 2018 [Value Modifier webpage](#). The Value Modifier payment adjustment ends in 2018. The Merit-Based Incentive Payment System under the new Quality Payment Program is replacing the Value Modifier. For questions about the 2018 Value Modifier, contact the Physician Value Help Desk at (888) 734-6433 (select option 3) or pvhelpdesk@cms.hhs.gov. [Click here](#) for more info.

Resident/Fellow Career Fair

Calling all Residents & Fellows! Plan to join us on **May 17 at 6:30 PM** in Baltimore for a career fair. Meet with leaders in their respective fields, ask questions, and network with area employers looking to hire! The evening will also include a heave reception with open bar.

Round table topics include:

- Child Psychiatry
- Private Practice
- Eating Disorders
- Public Health
- Academic Psychiatry

More information to follow.



2018 MPS Annual Dinner

Thursday, April 26 at 6 PM

Johns Hopkins Club in Baltimore

We'll celebrate the achievements made over the past year, and to turn over the gavel over to Patrick Triplett, M.D., incoming MPS President. Dr. Marsden McGuire will become President-Elect and Mark Ehrenreich, M.D. will become treasurer.

Winners of our Best Paper Contest and our new Resident/Fellow Poster Contest will be announced at the meeting. We'll recognize new Life Members, Fellows, Distinguished Fellows and 50 year members.

You won't want to miss this fun event; live music, good food, and even better company.

Watch for details coming soon. See you there!

See You There!

CLASSIFIEDS

EMPLOYMENT OPPORTUNITIES

Nationally Recognized Program Seeks Adult Psychiatrist Competitive Salary and Excellent Benefits, **Inpatient/Partial Hospitalization Attending** - Psychiatrist will work closely with a multidisciplinary treatment team in the assessment and care of patients with eating disorders. This unique practice opportunity combines the excitement of an academic environment with training of fellows, post-doctorate psychologists, social work interns and University of Maryland residents. Full-time or Part-time available MD license required. Please **FAX** resume to 410-938-5250, or **MAIL** to: Steven Crawford, M.D., 6535 N Charles St, Suite 300 Baltimore MD 21204, You may also **EMAIL** your resume to scrawford@sheppardpratt.org **The Center for Eating Disorders at Sheppard Pratt Hospital**, ranked by *U.S. News & World Report* among the Best Psychiatric Hospitals for the 24th consecutive year, is located in the suburbs of Baltimore, Maryland and offers convenient access to several major cities, the ocean and the mountains. Find out more about The Center for Eating Disorders by visiting our website: www.eatingdisorder.org

CLASSIFIEDS

EMPLOYMENT OPPORTUNITIES

PSYCHIATRIST - full or half time, independent contractor position with well-established & growing multidisciplinary practice. Spectrum Behavioral Health is an Annapolis area private practice with three desirable locations, congenial colleagues and comprehensive administrative support. For more information about SBH, visit our website: www.spectrum-behavioral.com. To discuss this opportunity, please call Barbara Usher, Operations Administrator, at 410-757-2077 x7121 or email barbara.usher@spectrum-behavioral.com.

PSYCHIATRIST---Outpatient Psychiatry Services at MedStar Franklin Square Medical Center is looking for an adult psychiatrist to work 36-40 hours per week. Evaluations are scheduled for 75 minutes, with 25 minutes for med checks. We offer flexible hours, CME reimbursement, 7 weeks paid time off, 403 B match, medical benefits and paid malpractice ins. Please email CV to stephen.pasko@medstar.net or call 443-777-7925 for details.

Psych Associates of Maryland, LLC seeks Adult and Child and/or Adult psychiatrist to join its thriving practice in Towson. NEVER SPEAK TO INSURANCE COMPANY FOR PREAUTHS! Very flexible scheduling. Unlimited vacation time. Partnership available. Email Drmalik.baltimore@gmail.com or call 410-823-6408 x13. Visit our website at www.pamllc.us

Full time Psychiatrist needed to join a unique community health center serving homeless individuals. Candidate should be interested in providing comprehensive outpatient mental health care in a multidisciplinary setting. Experience with dual diagnosis, strong interdisciplinary collaboration skills, and familiarity with harm reduction approach required. Buprenorphine waiver preferred. Health Care for the Homeless (HCH) is a non-profit Federally Qualified Health Center (FQHC) dedicated to preventing and ending homelessness for vulnerable individuals and families by providing quality, integrated health care and promoting access to affordable housing and sustainable incomes through direct service, advocacy, and community engagement. For additional information, we welcome you to visit our website www.hchmd.org. Comprehensive benefits offered include: malpractice coverage, health insurance, disability, life insurance, paid time off, CME allowance, retirement plans and dental insurance. One-hour initial evaluations and half-hour follow-ups. No call or weekends. Eligible for loan repayment programs. Apply for Psychiatrist [using this link](#).

Collaborative Counseling Center is seeking a Part-Time Board Certified Child and Adolescent Psychiatrist to provide psychiatric services to children, adolescents and adults. Candidates send letter of interest & resume to Emily@collaborativecounselingcenter.com.

Physician Group at University of Maryland St. Joseph Medical Center: Nationally Recognized Physician Group Seeks **Adult Psychiatrist**, Competitive Salary and Excellent Benefits, University of Maryland St. Joseph Medical Center is a member of the University of Maryland Medical System, a multi-hospital system with academic, community and specialty service missions reaching every part of Maryland and beyond. **Psychiatrist – Emergency Room:** General Psychiatrist needed for Emergency Room Consultations at Univ. of MD/ St Joseph Medical Center. Maryland MD license required. Please FAX resume and cover letter to 410-938-5250, or MAIL to: Steven Crawford, M.D., 6535 N Charles St, Suite 300, Baltimore MD 21204. You may also EMAIL your resume to mailto:stevec@umm.edu.

PRACTICE OPPORTUNITY - Established, busy multidisciplinary outpatient psychiatric practice in White Marsh is seeking an Adult Psychiatrist to provide psychiatric evaluations and medication management for adult patients. Join our practice of nineteen clinicians as a Limited Partner. Begin with an established case load and a potential for profit sharing. Medical/dental benefits are available. We participate with most major insurances and provide assistance with credentialing Full-time and part-time hours are available. Collegial environment and pleasant staff. See our website www.whitemarshpsych.com. Please send your resume and cover letter to dianne@whitemarshpsych.com and/or call George Strutt, PhD., President at 410-931-9280.

PSYCHIATRIST – full or part time, independent contractor position with thriving multidisciplinary practice. PsychCare has three desirable locations (Pikesville, Columbia, & Silver Spring), congenial colleagues and comprehensive administrative support. Competitive salary and flexible schedule. For more information about PsychCare, visit our website: www.PsychCareMD.com To discuss this opportunity, please call Levi Breuer at 410-343-9756 x 700 or email Hiring@PsychCareMD.com

The Mental Health Association has served the community as a leading private, non-profit organization since 1965. We are seeking an experienced Psychiatrist to serve as medical director. Responsible for: psychiatric assessment and diagnosis, medication management and education, continuity of patient care, and clinical consultation. MHA serves anyone in need of help, accepting Medicaid, Medicare or sliding scale. Position offers competitive salary, PTO, paid holidays, and days paid for CME. Please submit letter of inquiry along with resume to Ellie Bentz, Clinical Director at ebentz@fcmha.org

We have been awarded the contract once again!

MHM Services works with Maryland Department of Public Safety and Correctional Services and since 2005 we have provided mental health to this underserved population. Several new positions have been added Statewide!

**Featured positions: Assistant Medical Director – This is a New Position!
Tele-psych – work from home!**

Join MHM and experience the benefits of a career in correctional mental health.

We also have Full-time, Part-time, Day and Evening shifts available!

Why explore a career in correctional healthcare?

Regular hours

NO insurance paperwork or managed care hassles

Reasonable caseloads and diverse patient population

Secure and supportive work environment

The opportunity to make a real difference in the lives of those who need it most!

In addition to rewarding work and **highly competitive salaries**, we offer a **comprehensive benefits package** for employees working 30 hours per week or more.

- **Company-sponsored health, life, dental & disability insurance**
- **Generous time off, plus paid holidays**
- **401(k) plan with employer match**
- **Paid malpractice insurance**
- **CME reimbursement and additional paid days off**
- **Flexible spending accounts for healthcare and dependent care**
- **Same sex domestic partner benefits**

For more details, please contact Jane at **844-477-6420** or email CV to jane@mhmcareers.com

For details and a list of all our openings please check out our website:

<http://www.mhm-services.com/careers/index.html>

MHM Services, Inc

The Public-Private Partner for Healthcare®



Rewarding Opportunities for Child & Adolescent Psychiatrists Across Maryland



Sheppard Pratt
HEALTH SYSTEM

Sheppard Pratt Health System is seeking child & adolescent psychiatrists to work in multiple Sheppard Pratt programs across Maryland.

Child & Adolescent Opportunities Include:

Medical Director for Child & Adolescent Service Line

Sheppard Pratt-Towson Campus
Baltimore County

Child & Adolescent Service Chief

Sheppard Pratt-Towson Campus
Baltimore County

School Medical Director

The Forbush School at Glyndon
Baltimore County

Mann Residential Treatment Center Medical Director

Sheppard Pratt-Towson Campus
Baltimore County

Inpatient psychiatrists

Sheppard Pratt-Ellicott City Campus
Howard County

Outpatient psychiatrists

Behavioral Health Partners of Frederick
Frederick County

Part-time school psychiatrist

The Jefferson School & RTC
Frederick County

Part-time psychiatrist

Family Services, Inc.
DC Area

Inpatient, PHP, outpatient, telepsychiatry and crisis services psychiatrists

Sheppard Pratt-Towson Campus
Baltimore County

Requirements:

- Must be board-certified or board-eligible
- Must have a current license to practice in Maryland at the time of hire
- Individuals hired for inpatient, PHP, and residential school services participate in a call schedule

Why Sheppard Pratt Health System?

- Physician-led organization
- Generous compensation package with comprehensive benefits, including medical, dental, vision, and life insurance; an extensive wellness program; and ample leave
- Relocation assistance
- Sign-on bonus
- A network of the brightest minds in psychiatry
- Grand rounds, CME opportunities, on-site lectures
- State-of-the-art research and technology
- Cross-discipline collaboration

About Sheppard Pratt Health System

Consistently ranked as one of the top ten psychiatric hospitals by *U.S. News & World Report*, Sheppard Pratt is the nation's largest private, non-profit provider of mental health, substance use, special education, and social services. We employ more than 95 doctors who all share a passion for providing the best care to those we serve. To learn more about our services, visit sheppardpratt.org. EOE.



For more information, please contact Kathleen Hilzendeger,
Director of Professional Services, at 410.938.3460 or
khilzendeger@sheppardpratt.org.



REMY PALMER
SENIOR ACCOUNT MANAGER

EMERGING RISKS REQUIRE ENHANCED COVERAGE

**AS THE PRACTICE OF PSYCHIATRY EVOLVES,
SO SHOULD YOUR MALPRACTICE COVERAGE.**

The dedicated experts at PRMS® are pleased to bring you an enhanced insurance policy that protects you from the emerging risks in psychiatry.



MEDICAL LICENSE PROCEEDINGS

Psychiatrists are more likely to face an administrative action than a lawsuit.

Separate limits up to \$150,000



HIPAA VIOLATIONS

HIPAA enforcement continues to increase at the federal and state levels.

Separate limits up to \$50,000



DATA BREACH

The use of electronic media in psychiatric practice has increased.

Separate limits up to \$30,000



ASSAULT BY A PATIENT

Violence by patients against psychiatrists is more common than against other physicians.

Separate limits up to \$30,000

**These are just a few of our enhanced coverages included at no additional cost.
Visit us online or call to learn more and receive a free personalized quote.**

More than an insurance policy

(800) 245-3333 | PsychProgram.com/EnhancedPolicy | TheProgram@prms.com



Actual terms, coverages, conditions and exclusions may vary by state. Insurance coverage provided by Fair American Insurance and Reinsurance Company (NAIC 35157). FAIRCO is an authorized carrier in California, ID number 3715-7. www.fairco.com. In California, d/b/a Transatlantic Professional Risk Management and Insurance Services.