

MPS NEWS

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Editor: Heidi Bunes

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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 MPS Council will meet by videoconference on April 13 at 7:30 PM. All members welcome!

President's Column

My Last President's Column: A Year in Review

This has been a challenging and unusual year for our country, our state, and for the Maryland Psychiatric Society. The challenging events that have occurred over the past year are almost too numerous to count. First and foremost, there has been the coronavirus pandemic, which has killed over a half a million of our countrymen and upended our daily lives in previously unimagined ways. There have been the high-profile deaths of many Blacks at the hands of the police and the disproportionate effect of the virus on our minority communities that has brought to the forefront the systemic racism that is rampant in our society. There was the highly contentious 2020 presidential election that highlighted the marked polarization present in our country that culminated in the storming and trashing of the US Capitol with the aim of overturning a democratic election. Over the past year, due in part to certain politicians connecting the virus to its origin in Asia, there has been a marked increase in anti-Asian racist acts culminating in the recent murders in Atlanta.

All these events have impacted our members and the patients that we serve. I am happy to report that the MPS has met the challenges that it has faced over this past year by supporting our members, strengthening Psychiatry in Maryland, and addressing where we can, these larger issues facing our society. To deal with the pandemic, many of our members began seeing their patients through Telepsychiatry. The MPS kept our members informed about coding and reimbursement for these Telepsychiatry visits through our listserv and through emails. We continued to lobby for full reimbursement for Telepsychiatry services. All MPS commit-

tees and meetings were held online and this enabled many members to attend more easily than before. We specifically reached out to our members on the Eastern Shore and in Western Maryland to encourage their participation.

In June 2020, the MPS issued a [statement](#) condemning police brutality and racism and endorsed similar statements produced by the Black Psychiatrists of America and the American Association of Medical Colleges. The MPS Council tasked each MPS committee to develop short and long-term [goals to address structural racism, diversity, and inclusion](#). These goals were presented and approved at the March MPS Council meeting. In addition, the Council revised the MPS [vision, mission, and values](#) statement with the assistance of the Executive Committee and the Community Psychiatry and Diversity Coalition.

A major accomplishment over this past year was the agreement we forged with the Washington Psychiatric Society, which represents psychiatrists in Montgomery and Prince George's Counties, regarding sharing the cost of our lobbyist and reviewing legislation before the Maryland General Assembly together. This agreement will allow us to present a unified front to our legislators and significantly improved the MPS's financial position.

Our Legislative Committee continues to do yeoman's work reviewing many pieces of legislation and fighting for our profession and our patients. Dr. Anne Hanson held a well-attended, wonderful online tutorial on the workings of the Maryland General Assembly. She reviewed the history and structure of our state government, the legislative process, how to navigate the Maryland General Assembly's website, how to track a bill, the MPS legislative committee's process, and

(Continued)

perhaps most importantly, how psychiatrists can participate in this process.

With an eye towards the future, the MPS undertook several efforts to engage our youngest members. The Resident-Fellow Member (RFM) committee invited all residents and fellows at Johns Hopkins to join the [antiracism book club](#) established by the University of Maryland Sheppard Pratt residents. The RFM committee also surveyed all residents and fellows at the two training programs in Maryland asking how they would like to be more involved in the MPS. The Early Career Psychiatrists committee launched a similar effort to engage our ECP members. In addition, the MPS created a new [membership category for medical students](#) who are interested in becoming psychiatrists.

In closing, I would like to thank the many people that have made this such a successful year. Heidi Bunes and Meagan Floyd are the true backbone of MPS. It is through their tireless efforts that our society continues to thrive. The chairs of our various committees have done exceptional work during this past year. Anne Hanson and Jen Palmer have ably chaired our Legislative Committee through this unusual Maryland General Assembly session. Doris Balis and Ann Hackman, chairs of our Community Psychiatry and Diversity Coalition, have done excellent work helping us to look at ourselves and improve our commitment to diversity, inclusion, and social justice. Marissa Flaherty and Jamie Spitzer, the respective representatives of our ECP and RFM members on Council, have helped the MPS engage our younger members and ensure a solid foundation for the future. Connie Lacap agreed to chair our Membership Committee last year and has done a wonderful job. Jennifer Coughlin chairs our Academic Psychiatry Committee, which will be awarding [poster and paper awards](#) at our upcoming annual meeting. My thanks also go out to Bruce Hershfield, Editor of *The Maryland Psychiatrist*, Karen Swartz, chair of our Distinguished Fellowship Committee, Joanna Brandt and Ron Means, chairs of our Ethics Committee, and Paul Nestadt and Chris Marano, chairs of our Program and Continuing Medical Education Committee. I also would like to thank all members of the various committees; it is through their efforts that the work of the MPS gets done.

Finally, I would like to thank the members of the Executive Committee, Marsden McGuire, Ginger Ashley, and Jessica Merkel Keller, for all their help and support over this past year.

It has been an honor to serve as your president, and I look forward to continuing my service to the MPS as your Council chair. Here's hoping for a wonderful 2021 and beyond.

Mark J. Ehrenreich, M.D.

Calling All Members! 2021-2022 MPS Opportunities

Engage, Network, and Make a Difference in How Psychiatry is Practiced in Maryland

The annual MPS leadership cycle begins again this month with the installation of Ginger Ashley, M.D. as President. The MPS offers multiple ways for members to connect with the organization and each other, including volunteering for [committees](#) or joining an email [interest group](#). This is your organization representing your profession. Your energy and ideas can help the MPS effectively focus on issues that are important to you - this is your chance to help shape it! To review member opportunities and sign up for those of interest, [please click here](#).

Attention Outpatient Psychiatrists! Insurance Participation Survey

Please take [this survey](#) to help us understand your private practice, your experience with health plan networks, and what issues are most important to you. Responses will help APA and MPS advocate on your behalf with health plan payers, legislators, and regulatory agencies. Thanks!

Curbside Conversations Update

New information for Curbside Conversations is posted online. Over 20 topic areas with limited participation have been added! [Curbside Conversations](#) facilitates member connections related to specific practice areas. Members with in-depth knowledge chat informally with other members seeking information. The discussions are not formal consultations, but rather a collegial resource offered voluntarily to others in the MPS community. [Click](#) for details.

CONGRATULATIONS



MPS Council voted to award

Geetha Jayaram, M.D. 2021 MPS Lifetime of Service Award

Please join us at our Annual Meeting on April 22nd to honor Dr. Jayaram for this achievement.

See [page 4](#) for more information.

March 9 Council Highlights

Support for MPS Strategic Priorities

Dr. Ehrenreich reviewed the [MPS priorities](#) and asked Ms. Bunes to review the vendor list, which needs new entries and email updates. Council members were asked to help. She also discussed a draft of activities to engage new members and requested suggestions. One was a January invitation to join MPS advocacy; another was a late summer "save the date" for the November CME symposium.

Executive Committee Report

Dr. Ehrenreich said that Erik Roskes, M.D. agreed to represent the MPS on the new BHA Involuntary Commitment Workgroup that will develop recommendations by late April. Dr. Ehrenreich sent a welcome letter to MPS member liaisons at Hopkins and Maryland regarding Medical Student membership, which they will forward to students at their institutions. He referred to the list of [committee plans for addressing structural racism](#) and asked Council for comments or questions.

Dr. Ehrenreich revisited the revisions to MPS Vision Mission and Values discussed at the February meeting, as well as subsequently by the Community Psychiatry & Diversity Coalition and the Executive Committee. We expect to periodically re-evaluate the statement so he moved that Council approve the latest [updated version](#) without further changes. After discussion, Council voted unanimously in favor.

Dr. Ehrenreich returned to the problems with MPS member data on race and ethnicity discussed at the last meeting. He requested Council input on the draft categories to be used for race and expanded categories for gender. He explained that in addition to patient referrals, the foreseeable uses of MPS member data on race and ethnicity are to:

- Assess how well MPS membership reflects the racial and ethnic composition of licensed psychiatrists in Maryland.
- Assess how well member participation in MPS activities and leadership reflects the racial and ethnic composition of the membership as a whole.
- Assess how well the racial and ethnic composition of licensed Maryland psychiatrists reflects the state population.
- Create MPS networking opportunities and foster communication among MPS members who share common attributes and interests.

For these reasons, MPS intends to align its race and ethnicity categories with those used by the Maryland Board of Physicians and the U.S. Census, but up to \$15,000 is needed for changes to ethnicity and sex currently in the MPS Membership Management System. Following his motion to approve the funding, concerns were raised about the amount and how the MPS would pay. The motion was tabled to first hear the Treasurer's report before voting.

Dr. Shaya raised a concern related to an earlier part of the

Executive Committee report, that of someone being released by an administrative law judge based on legal interpretation or technicality rather than sound clinical judgment. His hospital system is considering special attorney representation at commitment hearings.

Secretary-Treasurer's Report

Dr. Merkel-Keller reported on the 2020 year-end financial statements reviewed by Norman Feldman, CPA. She noted that 2020 was a challenge worldwide due to COVID-19. By reacting quickly and managing expenses, MPS posted just a small loss, far less than projected.

- The Statement of Financial Position shows total assets of \$429K, down \$3K from last year, and fixed assets up \$3K (computer purchases). Cash and investments total \$398K, \$3K less than last year.
- The Statement of Activities compared to 2019 indicates total revenue of \$305K, down \$43K largely due to \$7K less advertising and \$29K less meeting income. Dues income is up slightly, comprising the largest percentage of total income at 69% (up from 60%). Total expenses are \$308K, down \$38K. Meeting expenses are \$32K less, but meeting income also decreased. The change in net assets is a \$3506 deficit, down \$4769 from a small surplus in 2019.
- The Statement of Cash Flows shows operations during 2020 resulted in a \$1K outflow of cash and \$11K was used to purchase computers, so the total cash outflow for the year is \$12K.
- An in-house Statement of Activities vs. Budget indicates total income is \$36K under budget. Advertising is short by \$14K and meetings are short by \$27K. Membership dues are \$5K more than budget and investment gains are \$7K higher. Expenses are \$53K under budget overall with \$28K of that from meetings. The \$3506 deficit is \$17K better than budget.

Next Dr. Merkel-Keller brought Council's attention to the draft Form 990 and 990-T, which include the same figures as the annual financial statements above as well as a long list of questions related to policy and governance. Council had an opportunity to ask questions and recommend changes to the 990 and then voted unanimously to accept the financial report and file the forms as presented.

Council then returned to the database funding question. Ms. Bunes explained that the member system connects with online member accounts on the website, so there is more work involved than might be obvious. MPS reserve funds would be used instead of increasing member dues. Dr. Ehrenreich spoke in favor of the database investment, noting there is money on hand and this is needed to address Council's anti-racism goals. The motion to allocate up to \$15K to improve the Membership Management System for race, ethnicity and gender was unanimously approved.

Legislative Committee Report

Dr. Hanson said we are through most of the 2021 session, having passed all filing deadlines. The MPS committee has reviewed the bills and decided what, if any, action to take. The main headline for psychiatry this year is telehealth. Also of interest are reducing the age of consent to treatment for mental health care to 12, police transport for emergency petitions and other EP provisions, expanded access to mental health care, review and treatment of suicide, etc. The arrangement with WPS has worked very well to support collaboration on priority legislation. Dr. Palmer noted that MPS took no position on the bill to legalize marijuana. [See [more details here](#); *The Maryland Psychiatrist* will include a full report.]

Membership Committee Report

Dr. Lacap reported there is now a full court press on member renewals. She circulated a list of members who still owe a total of \$22K of 2021 MPS dues. 40 owe both MPS and APA, 37 owe APA only and 39 owe MPS only. These numbers are higher than in previous years. She asked Council members to reach out and urge those with unpaid dues to continue as members.

New Business

A list of nominees for the 2021 MPS [Lifetime of Service Award](#) was circulated and Council discussed ways to approach the decision. Council voted for Geetha Jayaram, M.D. to receive the award this year.

Jamie and Sarah Raskin to Receive Anti-Stigma Advocacy Award

Jamie Raskin and Sarah Bloom Raskin will be awarded the 2021 Maryland Foundation for Psychiatry (MFP) Anti-Stigma Advocacy Prize for the [tribute about their son](#), Tommy, posted on January 4, 2021. The MFP board of directors felt that it was very effective in conveying what a wonderful and gifted person their son was, how depression did not detract from this, and how painful and sad his loss and the loss of others suffering from depression can be. The board also greatly admired their courage in writing about him in such a forthright manner.

The Anti-Stigma Advocacy Award carries a \$500 prize and will be formally presented at the [Maryland Psychiatric Society annual meeting on April 22](#).

The Foundation established this annual prize for a worthy media piece, preferably local or regional, that accomplishes one or more of the following:

- Shares with the public their experience with mental illness in themselves, a family member, or simply in the community.
- Helps others to overcome their inability to talk about mental illness or their own mental illness.
- Imparts particularly insightful observations on the general subject of mental illness.

[Click here](#) for information about past winners.



2021 Maryland Psychiatric Society Annual Meeting

Thursday April 22, 2021 7-8:30 PM
This won't be your usual virtual meeting!

This once-a-year [program](#) is FREE of charge!

Door prizes will be given in three categories:

- Resident Fellow Members
- Early Career Psychiatrist Members (within 7 years of starting practice)
- All other members

We have a lot to celebrate! [Join with your colleagues](#) in this interactive event that will include some fun in addition to information about the past year in Maryland psychiatry and a vision for the future.

We will welcome **Virginia Ashley, M.D.** as 2020-2021 MPS President. **Jessica Merkel-Keller, M.D.** will become MPS President-Elect and **Carolina Vidal, M.D., M.P.H.** will become Secretary-Treasurer.

- The 2021 MPS Lifetime of Service Award Winner Geetha Jayaram, M.D. will be honored.
- The 2021 Maryland Foundation for Psychiatry Anti-Stigma Advocacy Prize will be given to Maryland Congressman Jamie Raskin and Sarah Bloom Raskin.
- Best Paper Contest and Resident/Fellow Poster Competition awards will be presented.
- We'll recognize new Fellows, Distinguished Fellows, lifer members and more!

[Register today!](#)

Special Programs for ECP/RFM Members

Senior Psychiatrists, Inc. and PRMS have teamed up to create Lessons Learned, a series of virtual presentations for Early Career Psychiatrists and Resident/Fellow Members. Three presentations are available, and topics included *Careers in Psychiatry*, *Hoarding* and *Federal and State Mental Health Responses to Covid-19*. To access these presentations please visit: <https://www.horizonvirtualvenue.com/1-spllessons/> and enter "lessons" when prompted for a password.

Congratulations to MPS Paper of the Year Winners!

The annual MPS Academic Psychiatry Committee "[best paper](#)" award recognizes outstanding manuscripts authored by young psychiatrists that are published or in press in the immediately preceding year. The selection subcommittee reviewed several submissions of excellent papers. Congratulations to this year's winners who will receive cash prizes and be recognized at the [April 22 annual meeting](#):

Resident-Fellow Member (RFM) – two winners this year:

Rachel L. Dillinger, M.D. (UMMC/Sheppard Pratt)

[Addressing the Stigma Surrounding Serious Mental Illness in Adolescents: a Brief Intervention](#)

Jason Theis, M.D., Ph.D. (JHU)

[Firearm Suicide Among Veterans of the U.S. Military: A Systematic Review](#)

Early Career Psychiatrist (ECP)

Elizabeth J. Prince, D.O.

[A longitudinal study of personality traits, anxiety, and depressive disorders in young adults](#)

MPS Poster Competition Winners

This year the MPS Academic Psychiatry Committee's poster competition for Resident-Fellow Members had several outstanding entries, all of which will be on display at the April 22 annual meeting. The committee used a scoring system to identify the top three posters. The following three winners will receive cash prizes and will be honored at the annual event.

First Place: Zachary A. Cordner M.D., Ph.D. (JHU)

Effects of fluoxetine and environmental enrichment on chronic defeat stress-related behaviors & gene expression in the amygdala

Finalist: Mark Kvarta, M.D., Ph.D. (UMMC/Sheppard Pratt)

Abnormal Anterior Cingulate Activation Revealed by a Novel Ankle Shock Stress Task in Schizophrenia and Association With Depression and Psychosis

Finalist: Jooyoung Lee, M.D., M.S. (UMMC/Sheppard Pratt)

Depression-related Internet Search Volume as a Correlate of Future Child and Adolescent Suicides: A Cross-correlational Study of Monthly Google Search Volume and Suicide Rate of Young Individuals in the United States

New Opportunity for Medical Students

The MPS now offers a category of membership for medical students to help them learn more about psychiatry and connect to potential mentors. This category is free of charge and includes access to MPS communications, interest groups, committees, and listserv. MPS membership is an invaluable opportunity for students looking to enter psychiatry. Email mfloyd@mdpsych.org to volunteer to serve as a resource to medical students.

Medical Student Mentors Needed

The MPS is looking for members who would like to serve as mentors for our new medical student members. As a practicing psychiatrist, you will help guide them throughout their medical school journey and help with their growth both personally and professionally. If you feel you would make a good mentor, please email mfloyd@mdpsych.org.

MPS Members Out & About

On March 3, **Jonathan Shepherd, M.D.** was featured on WYPR's On the Record discussing [The Surge in Mental Health Needs During the Pandemic](#), which he envisions stretching beyond the pandemic itself.

Robert Herman, M.D. had his [letter](#) about police fatally shooting a man with mental illness published in the *Capital Gazette* on March 20.

MPS Affiliate Member **Marilou Tablang-Jimenez, M.D.**, Chair of Psychiatry at MedStar Montgomery, has been elected Washington Psychiatric Society President-Elect.

MPS Membership

The following individuals have applied for membership. Unless any current members have evidence that an applicant does not meet the criteria for ethical and professional standards, these actions will be approved 14 days after publication.

Laura Chen
Sara Curtis
Emily Daniels
Arshom Foroutan
Aidan Kennedy
Conrad Mascarenhas

Rachel Orlinsky
Alyssa Schledwitz
Jason Theis, M.D.
Cassie Wicken
Amna Zehra

Transfer In

Artin Mahdanian, M.D.
Venkata Sugnanam, MBBS

Reinstatement

Travis Klein, M.D.

Maryland News

General Assembly Update

With just one week left before the Maryland General Assembly adjourns at midnight on April 12th, a majority of the legislative and budgetary activity is in the rearview mirror. As session winds down, committee work will decrease, and floor sessions will last longer as the full Senate and House of Delegates debate bills for the final time before passing or rejecting the measures. Here is the status of some of the issues the MPS has reviewed this session:

HB209/SB168: Public Health – Maryland Suicide Fatality Review Committee seeks to establish the Maryland Suicide Fatality Review Committee, also referred to as the State Team, and to identify and address the factors contributing to suicide deaths and facilitate system changes in the State to prevent suicides; requiring the Committee to meet at least quarterly each year, report at least annually to the Governor and the General Assembly, perform certain annual studies, and disseminate findings and recommendations to policymakers, health care providers, health care facilities, and the public; etc. The Senate Bill has passed, and the bill will now move to the House. The MPS supported this bill.

SB164/HB605: Veterans – Behavioral Health Services – Mental Health First Aid: This bill, if codified, will increase awareness of mental illness and substance use disorders as well as attune our community to the idea of early intervention. The training guidelines of SB 164 will reduce stigmas associated with mental illness and treatment, connect more military personnel and veterans to meaningful mental health services, potentially reduce fatalities due to overdose and suicide in the military community, and establish the complex support system that co-morbid conditions create. House Bill 605 unanimously passed the House, but the March 20th hearing on the Senate bill was cancelled, so the bill's future is uncertain at this time. The MPS supported this bill.

SB96: Behavioral Health Programs and Health Care Facilities – Safety and Community Relations Plans would require that the regulations adopted by the Behavioral Health Administration governing licensure of behavioral health programs include a requirement for establishing and implementing a safety plan for the safety of the individuals in the program; requiring a behavioral health program to submit a community relations plan; providing that a facility may satisfy requirements by implementing a safety plan established for another purpose, including an emergency plan; etc. MPS opposes Senate Bill 96 (SB 96) as this bill reinforces stigma and unwarranted fear of individuals presenting with mental or other forms of illness by suggesting that every facility which treats these individuals must protect the community from them. In addition, SB 96 may inadvertently create liability issues for the clinic for circumstances that are beyond their control and thus drive up the cost of mental health and substance use disorder treatment. The bill passed unani-

mously out of the Senate but was amended to require a safety plan if the accrediting agency requires it but was also amended to allow the state to require an "emergency plan" if requested.

HB 200: Public Safety - Access to Firearms - Storage Requirements (Jaelynn's Law): Prohibiting a person from storing or leaving a firearm in a location where a minor could gain access to the firearm, with specific exceptions to the prohibition; prohibiting a person from storing or leaving a firearm in a location where an unsupervised minor could gain access to the firearm, an unsupervised minor does gain access to the firearm, and the firearm causes harm to the minor or another person; establishing certain penalties; etc. This bill would have required gun owners to store firearms under specific secure conditions to prevent access by minors. The MPS supported this bill, but unfortunately, it died in committee.

Two other bills of note:

- MPS supported [HB0689](#) which expanded the type of mental health professional allowed to sign civil certificates to include LCSW-Cs and LCPCs in addition to psychiatrists.
- The MPS successfully opposed bills to civilly commit people solely on the basis of a substance use disorder and to allow police to require mental health professionals to transport patients for emergency evaluation.

Further information about positions the MPS took on bills during the 2021 session [please click here](#). We welcome input from members on legislation. The MPS Legislative Committee is always looking for more members—please [email us](#) if you're interested!

*Meagan Floyd
Anne Hanson, M.D.*

BHA-MedChi Webinars

The Behavioral Health Administration and MedChi webinar series, *Helping the Helpers and Those They Serve*, is for Maryland behavioral health and medical health care providers of all disciplines in both community and hospital settings. They enhance health care worker self-care as well as the care they provide by addressing the COVID-19 pandemic, social justice issues, and other stressors. CME credits are free. Webinar recordings and slides are archived on the [BHA/MedChi webinar page](#). April programs run **5 to 6 PM**:

April 8: [Dealing With Microaggressions Experienced by Health Care Workers Related to COVID-19](#) by Crystal Han, MD and Amanda Sun, MD. Moderator: Angeline Pham, MD.

To deliver a presentation, serve as moderator, or suggest self-care topics/presenters, email [Steve Whitefield, M.D.](#)

Maryland News

Coordinating Care with Medical Marijuana Recommenders

One of the reasons that patients need hospital admission is using substances. Often that includes marijuana that has been legally "recommended" by cannabis clinic docs. Unlike other potentially dangerous substances, medical marijuana does not go into the PDMP and psychiatrists cannot call the pharmacy to find the prescriber. To address this problem, [Maryland Medical Cannabis Commission](#) (MMCC) Executive Director William Tilburg clarified that if a physician can prove that a patient relationship exists, HIPAA's care coordination powers allow the MMCC to share the certifying provider's name and information.

Thank you to Paul Nestadt, M.D. for establishing this process and posting it to the MPS listserv! He noted a paper by Jason Doctor found that when opioid prescribers were alerted to patient overdoses, they decreased unhealthy dose prescription. He also provided [a link](#) to a balanced NEJM review by the director of NIDA on the adverse effects of cannabis, including exacerbating schizophrenia (in addition to potentially adding to the risk of developing schizophrenia itself). He recommends letting medical marijuana certifying providers know about the impact on your shared patients.

If your patient is being inappropriately certified to receive medical marijuana, and you want to coordinate care as you would with your patients' co-prescribers, reach out to William Tilburg at william.tilburg@maryland.gov. He will need proof they are your patient (progress note), after which he should be able to send you full contact info.

ED and Inpatient Alerts from CRISP

CRISP can alert you at no cost when a patient is admitted to, and/or discharged from, a participating hospital ED or inpatient unit. You can request these ENS alerts -- [Encounter Notification Service](#) -- weekly, daily, or even in real-time. The alerts enable you to provide better care management for patients with more complex problems, but also facilitate the billing of Transitional Care Management (TCM) codes (99495 & 99496) when seen soon after a hospital discharge. You will need secure email to receive notifications, which CRISP can help you with if needed. This service helps to keep providers in the loop about what's happening with their patients. Patients do have the right to opt out of the notifications, and it's good practice to inform them that you would get notifications. Thanks to Steve Daviss, M.D. for posting this reminder on the MPS listserv!

FY20 MBP Annual Report

The Maryland Board of Physicians (MBP) Fiscal Year 2020 [Annual report](#) lists the three most common allegations for complaints as unprofessional conduct in the practice of medicine (398), failure to meet the standard of care (272), and failure to keep adequate medical records (82). Over half of the complaints filed came from patients or their families. Forty-three cases were referred to peer review. A total of 51 physicians lost their licenses, including 16 that were surrendered, and 85 had their licenses restricted. There were 65 non-prejudicial actions against physicians and 11 other prejudicial actions, mostly reprimands. Physician fines through disciplinary actions totaled \$326,000 and their administrative fines totaled \$24,875.

Actively licensed physicians in Maryland totaled 32,397 and there were 14,525 allied health practitioners actively licensed by MBP. Total licenses issued via the [Interstate Medical Licensure Compact](#) were 224. MBP processed 1544 physician assistant delegation agreements. While there were 66 positive criminal history records checks for physicians, none of them were denied licensure or renewal.

Maryland Honoring Choices Coalition

MedChi and the Horizon Foundation of Howard County are forming the [Maryland Honoring Choices Coalition](#), dedicated to increasing awareness around, and improving accessibility of, advance care planning in Maryland. The initial goal of the Coalition is to establish a broad-based association of multiple groups to raise awareness about end-of-life choices and to educate Marylanders about end-of-life issues and the ability to electronically upload their advance healthcare directive documents to CRISP. The Coalition vision is a Maryland where all people are empowered—and encouraged—to make their end-of-life wishes known, and to ensure those wishes are honored. It will work to implement the [recommendations](#) of the State Advisory Council on Quality Care at the End of Life. The MPS became a coalition participant in March.

Emergency Special Enrollment Period Extended

As part of the state's overall response to the coronavirus, and to prioritize health and safety, Maryland Health Connection has a new special enrollment period for uninsured Marylanders to enroll in a private health plan. The coronavirus emergency special enrollment period ends **May 15**. [Click here](#) for more details.

Maryland News

Support During COVID

Working in health care already involves a unique set of stressors, to which the COVID-19 pandemic added exponentially. Following are options for support during these stressful times.

Operation Courage is a BHA initiative to provide mental health support to Maryland's workforce, including essential frontline workers, first responders, and health care workers. It starts with a free online assessment followed by a free consultation, and those who decide to engage are offered up to six weeks of therapy. Insurance is accepted, copays are waived when possible, and discounted rates are available if uninsured.

Maryland COVID-19 Mental Health Crisis Support Program offers free, confidential mental health support for people working in skilled nursing and other long-term care facilities impacted by COVID-19. [Request mental health services](#). For questions, email miemss.crisisresponse@maryland.gov. For urgent requests, call 1-800-648-3001.

Maryland's Helpline — call 211, and press 1 — has an option to receive texts with caring messages of hope and encouragement for mental wellness from the BHA sponsored text-messaging platforms [MDMindHealth](#) and [MDSaludMental](#). Text MDMindHealth to 898-211 or text MDSaludMental a 898-211. The helpline can also help with accessing routine mental health and substance use services or you can [chat confidentially](#).

BHA/MedChi Behavioral Health Webinar Series: Helping the Helpers and Those They Serve at 5 PM on the second and fourth Thursdays of the month is for Maryland's health care workers of all disciplines. CMEs are available at no cost.

MPS Supports Combination of TCM and PRP Services for Children and Youth

MPS joined other provider and advocacy organizations in the Maryland Children's Behavioral Health Coalition to call for an end to the state's [new service combination exclusions effective April 1](#) for psychiatric rehabilitation programs serving children and youth (PRP). Targeted case management (TCM) is among the list of excluded services. Removing a clinical intervention like PRP from the range of services that can be coordinated by a TCM provider will defeat the purpose of TCM and limit options for Maryland children and families. [Click here](#) for a copy of the letter sent to BHA Child, Adolescent and Young Adult Services Director Maria Rodowski-Stanco, M.D.

Maryland Medicaid Provider Validation

Maryland Medicaid has an easy to use [Provider Validation Tool](#) that can verify whether a provider is enrolled and the type of enrollment. Just enter the NPI or Medicaid Provider ID number. Users can even put in a prior date if they are being denied based on a previous date of service. **Remember that Medicaid is now requiring some type of enrollment for provider prescriptions to be covered at the pharmacy.** [Click here](#) for more details.

Committee Goals for Addressing Structural Racism and Inclusion

At the request of MPS Council in September, each MPS committee has identified steps it will take to address structural racism and inclusion within the organization. These plans were reported to Council in February and accepted by Council at its March meeting. **Detailed plans are available on the MPS website.** [Please click here](#) for more information.

HCH Community of Practice on Homelessness

The MPS Community Psychiatry & Diversity Coalition (CPD) is connecting in an organized way with other groups that work to address social determinants of health, equity, and related problems to create linkages for MPS members to resources and opportunities for advocacy. CPD has identified a program at Health Care for the Homeless to bring to members' attention, [Community of Practice on Homelessness](#). Register for the April 22 event *Reimagining Restorative Justice through the Lens of Eliminating Structural Racism* at [this link](#). Join the Facebook group [here](#).

Mental Health Awareness Youth Art Display

Maryland First Lady Yumi Hogan welcomes children and youth to join a statewide art project that raises awareness about the importance of mental health through artistic expression. This year, Mrs. Hogan asks children and youth to create artwork expressing something that makes them feel **happy, healthy, or hopeful**. A selection of artwork will be showcased online for the First Lady's Mental Health Awareness Youth Art Display on Monday, May 3. **Submit artwork by the April 9 deadline** – see details at [this link](#). For questions contact Kirsten.Robb-McGrath@maryland.gov or 410-767-3660.

21st Century Cures Act Rules Effective April 5

Psychiatrists are among the “actors” to whom the new rules about patient access to records apply. The federal Office of the National Coordinator for Health IT (ONC) requires actors to comply with information blocking prohibitions starting **Monday, April 5**. Requirements are based on Electronic Health Information (EHI), interference with access, exchange, or use of EHI, and eight exceptions.

Although other laws outline patients’ rights to their records, the ONC rule is limited to EHI. According to PRMS, it applies to all providers with EHI, even they are not covered entities under HIPAA. The ONC rule does not require use of an EHR, and does not require proactive EHI sharing, but does require providers to respond promptly to requests received. Ultimately, the intent is for patients to access EHI via apps. More widespread and routine access underscores the need for psychiatrists to be aware of patients as they document the medical record. The PRMS decision tree (see pg 4 at [this link](#)) can help psychiatrists decide what their Cures Act obligations are. While EHI includes clinical notes, psychotherapy notes (as specifically defined) are excluded. Enforcement details are not yet available, but civil monetary penalties will apply for actors found to be blocking information.

Please refer to the PRMS fact sheet, [Information Blocking: What Psychiatrists Need to Know](#), for an excellent summary. An APA summary, including an archived webinar, is available [here](#).

Psychiatrists with Immediate Patient Openings Available

The MPS maintains a list of members who can see new patients quickly. It can be accessed from the home page of the website <https://mdpsych.org/>. Look for “MPS Members Actively Taking New Patients: Appointments Within 1-2 Weeks” under the Classified heading. The list is updated monthly, usually on the last day of the first week. Members can refer patients to this resource. If no one suitable is on the immediate availability list, they can also try the [Find a Psychiatrist search](#), but wait time may be longer.

MPS Advocates for Gun Violence Prevention Research

The MPS signed onto a letter voicing support of \$50 million in funding to the CDC and NIH in FY2022 to conduct public health research into firearm morbidity and mortality prevention. The letter illustrates the broad support of **202** national, state, and local medical, public health, and research organizations for this critical funding. For a copy, use these links:

- [House letter](#)
- [Senate letter](#)

Council Approves Updated MPS Vision Mission Values

VISION

The Maryland Psychiatric Society is a professional organization of psychiatrists that works to foster high quality, accessible, culturally humble comprehensive, effective, and patient-centered care for Maryland residents living with mental health and substance use conditions.

MISSION

The mission of the Maryland Psychiatric Society is to:

- Advocate for all Maryland residents living with mental health and substance use disorders to receive the highest quality care
- Work to ensure that historically disadvantaged and marginalized individuals have access to culturally respectful, comprehensive treatment
- Serve and represent the professional needs of Maryland psychiatrists, including underrepresented and diverse voices within the psychiatric community
- Collaborate with other professional, community, and government organizations to advocate for our patients’ rights and interests

VALUES

- Professional responsibility based on the highest standards for clinical practice and professional conduct
- Patients making empowered choices
- Universal access to the most effective care
- Respect for patients and colleagues
- Lifelong professional learning
- Collegial support
- Commitment to diversity, equity, and inclusion within our membership and within the field of psychiatry
- Recovery and healing

The Community Psychiatry and Diversity Coalition and the Executive Committee had central roles in drafting the updates. This is one part of a multi-pronged response by the organization to the Council’s commitment in June 2020 to “questioning our practices, listening to people of color in our community and designing a plan with specific actions that create meaningful solutions for change.”

APA App Advisor Expert Panel

The APA has a recurring webinar focused on digital mental health. “[Ask an APA App Advisor](#)” is held the second Tuesday of each month beginning **April 13 at 3 PM**. At the first event, members of App Advisor will explain the [App Evaluation Model](#), and respond to questions. Registration and an opportunity to pre-submit questions is [here](#). Please contact appadvisor@psych.org with questions.

APA News & Information

March 2021 APA Board of Trustees Report (*abridged*)

Three contentious items dominated discussion at the March board meeting, again: institutional racism, the budget, and our relationship with the American Board of Psychiatry and Neurology (ABPN). The decisions facing us, and really all of organized medicine, are complex, and I hope that the current impulse to demonize others is put on hold for a bit.

Racism is real, pervasive, and commonly unrecognized. The APA board has struggled with how to address the effects of racism within APA and the country. The Task Force on Structural Racism has come up with a series of recommendations which the board voted on, trying to increase involvement of under-represented groups. Term limits in components is one effort, so that there are more open slots for newer members, with explicit efforts to reach out to groups not currently represented. The elections committee has proposed, and the Board approved, piloting changes in election procedures to level the playing field to try to be more inclusive.

APA's budget is a continual challenge and impacts members very directly in both the services provided and the dues charged. Many members and former members say they are not sure that they get anything for their dues money. Much of what APA does benefits all psychiatrists, really all society, and so there is no convenient divide between members and non-members. Not having an in-person annual meeting two years in a row has contributed to losing people who take advantage of the member discount. Losing the meetings also blows a hole in our budget by itself, since they are a reliable source of income.

Budget concerns also play a role in the relationship between APA and ABPN. There are no easy solutions to this complicated problem. Even before the Maintenance of Certification (MOC) wars, there was dissatisfaction with ABPN. The American Board of Medical Specialties (ABMS), a group to which ABPN belongs, is where MOC started, and several of the other specialties are happy with it. One issue is whether the ABMS one-size-fits-all serves specialties like ours. There is no agreement on whether board certification denotes minimal competency, or a higher standard, but board certification was grudgingly accepted so long as it was a one time thing. Time-limited certificates raised more concern about differences in practice, sub-specialization, and how the exam could be fair to all. APA has been able to make MOC more palatable, but the process remains cumbersome, complicated, and costly, as a recent member survey demonstrated.

The question is whether our specialty is prepared to go it alone and cut ties with the ABMS monopoly. An alternative certification system, the National Board of Physicians and Surgeons, is trying but even they require initial certification by an ABMS board. It is only accepted at 138 hospitals (more

than 6000 in US,) unclear how many insurance companies, and so is uncertain. APA, AMA and other specialties are united in opposing board certification as a condition of hospital privileges, insurance empaneling, or licensure. But our opposition only goes so far; most hospitals want to see certification. Should APA take over the whole board certification process, or at least MOC? The Board voted to approve exploring the legal, ethical, and financial aspects. See the [APA website](#) for more information.

Another question is whether APA should accept unrestricted educational grants from ABPN. The amount of money is substantial, and increased dues will cost memberships, cutting services could harm the organization and profession, yet there is worry about the conflict of interest. The board voted to keep the money and accept more this year, while at exploring ways to potentially enter the board certification business.

Please let me know your concerns about this or other issues of which APA should be mindful.

Kenneth Certa, M.D., Area 3 Trustee
Kenneth.Certa@jefferson.edu

Webinars on Cannabis and Mental Health

APA and the American Academy of Addiction Psychiatry will host a two-part webinar series on cannabis. The first webinar will provide an overview and updates on cannabis use in patients, mental health impacts, and clinical practice recommendations based on the latest research. The second webinar will provide additional information and answer attendee questions on cannabis use by patients. Both start at 1 PM.

[Register for April 8 Webinar](#)
[Register for April 15 Webinar](#)

APA M/UR Caucuses

Four of APA's seven minority and underrepresented ([M/UR caucuses](#)) are holding elections for leadership positions: the Caucus of American Indian, Alaska Native, and Native Hawaiian Psychiatrists; the Caucus of Hispanic Psychiatrists; the Caucus of LGBTQ Psychiatrists; and the Caucus of Women Psychiatrists. **Saturday, May 1** is the deadline to join a caucus or switch caucuses to be eligible to vote. A member may enroll in more than one M/UR caucus but may vote and/or hold elected office in only one. To join a caucus, visit your [member profile here](#).

APA News & Information

APA Mental Health Equity Fireside Chat

On Thursday April 8, a two-part, virtual event, [The Impact of the COVID-19 Pandemic on the Mental Health of African Americans](#), will be held for the general public as well as APA members. This APA webinar series will examine strategies and opportunities to improve the mental health of African Americans during the COVID-19 pandemic, while also raising awareness and building trust on the efficacy of the COVID-19 vaccine. Panelists include Black Psychiatrists of America President-elect **Cynthia Turner-Graham, M.D., DLFAPA** and Viral Immunologist **Kizzmekia S. Corbett, Ph.D.**, Team Lead for development of the Moderna vaccine. APA Deputy Medical Director and Chief, Division of Diversity & Health Equity **Regina James, M.D. will be Moderator.** [Click here for details.](#)

Nominations for APA Awards

Each year APA honors individuals for career achievements, lifetime service, outstanding research, and other ways they've improved the lives of people with mental illness. Nominations are being accepted for:

- **[Manfred S. Guttmacher Award](#)** - recognizes an outstanding contribution to the literature on forensic psychiatry in the form of a book, monograph, paper, or other work.
- **[Isaac Ray Award](#)** - recognizes a person who has made outstanding contributions to forensic psychiatry or to the psychiatric aspects of jurisprudence.
- **[Carol Davis Ethics Award](#)** - recognizes a member who has authored an outstanding publication on ethics.

APA Statement on the Shootings in Georgia

Eight people, including many women of Asian descent, were shot dead at spas in Georgia last month. The shootings come at a time when anti-Asian American racism has swelled in the U.S. The APA issued a [statement](#) condemning them and expressing support for Asian American and Pacific Islander communities. The uptick in racism against these communities since the start of the pandemic has increased the mental health impacts for them and the nation as a whole.

FREE April APA Course of the Month

'**Pharmacological Approaches to Treatment-Resistant Depression**' highlights the recent progress in identifying new therapies for depressed patients who have not responded to standard antidepressants, including atypical antipsychotics, as well as glutamatergic and GABAergic compounds. [Click here to access the Course of the Month.](#)

Medicare Updates

April 8 QPP Webinar

A CMS webinar on **April 8 from 2 – 3:30 PM** will give an overview of the 2021 Quality Payment Program (QPP), including requirements for the Merit-based Incentive Payment System (MIPS), Advanced Alternative Payment Models (APMs) and MIPS APMs. CMS will answer attendee questions at the end if time permits. [Register here.](#)

Open Payments Review Period Begins

The [Open Payments Program](#) review, dispute and correction processes run from April 1 to May 15. Reporting entities have submitted data to the Open Payments system on payments or transfers of value made to physicians and teaching hospitals during 2020. **Beginning this month, physicians and teaching hospitals have 45 days to review and dispute records attributed to them.** CMS will publish the 2020 Open Payments data and updates to previous program years in June 2021. For questions, email openpayments@cms.hhs.gov or call 1-855-326-8366 M-F 8:30 AM. to 7:30 PM, excluding Federal holidays.

AMA Advocacy on Medicare Rates

The AMA [supports the provisions of H.R. 1868](#), which would stop scheduled Medicare cuts totaling 6%. Physician practices still face financial challenges with higher overhead costs, such as personal protective equipment, and lost revenue during the pandemic. Congress acted earlier to prevent the imposition of 2% Medicare sequester cuts. H.R. 1868 would extend the moratorium on the 2% cuts beyond the March 31, 2021 deadline. The bill also avoids an additional Medicare statutory pay-as-you-go (PAYGO) cut of up to 4% that would be triggered by the budget impact projected under the American Rescue Plan Act of 2021.

The [AMA reports](#) that the U.S. Senate voted to extend the 2% Medicare sequester moratorium set to expire April 1 through the end of December. Consequently, the House needs to pass the Senate language when it returns from Easter recess in mid-April. CMS is expected to hold off processing April claims until then to avoid making reduced payments. Stakeholders expect legislation to be considered later in the year to avoid the additional 4% Medicare sequester cut.

APA Annual Meeting

The APA's online 2021 annual meeting will be held Saturday to Monday, May 1 to 3. Participants can earn up to 13.5 CME credits through live sessions. [Learn more.](#)

American Rescue Plan

President Biden signed the [American Rescue Plan](#) Act of 2021 (ARP) into law on March 11. Under the new law, many people who buy their own health insurance directly through the marketplace will be eligible to receive higher tax credits to reduce their premiums starting April 1. ARP also pays 100% of COBRA premiums for laid-off workers. Increased affordability and expansion of coverage will allow historically uninsured communities – especially those who have faced significant health disparities – to access care. The Biden-Harris administration is further expanding access to health insurance coverage and improving access to mental health services and community-based programs that address social determinants of health. **In Maryland, 50,100 uninsured residents are newly eligible for tax credits and 3,200 residents are now eligible for \$0 dollar benchmark marketplace coverage.** [Click here](#) for details.

Among the other provisions [APA supported](#) are:

- Funding for mental/substance use disorder services through programs like the Community Mental Health Services Block Grant and the Substance Abuse Prevention and Treatment Block Grant.
- The Dr. Lorna Breen Health Care Provider Protection Act, which funds training, educational programs, and other initiatives designed to promote mental and behavioral wellness of health care workers.
- Funding for community behavioral health services, such as the National Child Traumatic Stress Network, Project AWARE (Advancing Wellness and Resiliency in Education), youth suicide prevention, and Certified Community Behavioral Health Clinics.
- Increased Medicaid funding, including resources for mobile crisis services and other community-based behavioral health needs.
- Funding for pediatric mental health care access grants to promote integration with pediatric primary care.
- In addition, mental health services and supports are eligible for a portion of the funding provided to reopen elementary and secondary schools.

[Click here](#) for information about \$2.5 billion in new SAMHSA block grant funding.

DID YOU KNOW?

Position openings and office space available are also posted on the MPS website! Listings from each newsletter issue are displayed online for the month of the publication. If you can't find your newsletter in your email inbox, visit the [Classifieds page](#) to view employment and office space ads.

CLASSIFIEDS

POSITIONS AVAILABLE

White Marsh Psychiatric Associates, LLC (WMPA) is seeking an Adult Psychiatrist to join our practice. WMPA is an established multi-disciplinary outpatient practice conveniently located off I-95 in White Marsh. We offer a collegial work environment with an excellent support staff, internal billing, and potential for profit sharing. WMPA has contracts with most major insurance carriers that facilitates excellent referral sources and quick caseload development. We are seeking full or part-time providers to join other professionals in a setting that values quality patient care and the freedom that comes from outpatient clinical practice. Please send your resume and cover letter to drfrank@whitemarshpsych.com and/or call Travis Frank, PsyD., President @ 410-931-9280.

PSYCHIATRY POSITIONS: MedStar Health is seeking psychiatrists to work in the Baltimore area in a variety of settings. Our hospitals provide inpatient, outpatient, intensive outpatient, partial hospitalization and consult liaison services. We offer flexible hours with competitive comp plans and benefits including CME reimbursement, 7 weeks paid time off, holidays and personal leave, 403 B match, medical benefits and paid malpractice ins. and much more! Please email CV to stephen.pasko@medstar.net

OFFICE SPACE AVAILABLE

COLUMBIA 1 or 2 windowed offices (\$550/650) incl. utilities & conference room use in 11-office, 1-story condo in park-like setting. HVAC ionization deemed effective for COVID 19. Networking w/ psychologists & other professionals, who follow CDC/health department guidelines for safe practice. Full-size kitchen, large waiting areas with air purifiers & 2 bathrooms. High-speed wireless internet available. Near routes 29 & 175- easy access from 95. Contact Julie Morrison at 410-952-9574 jm@drjuliemorrison.com.

Large sunny office in two-office Suite in Towson: Convenient to Charles St and Beltway, Modern Class A building (The Exchange), Shared Waiting Room. Available furnished or unfurnished. \$1100/month includes all utilities, phone, internet. Contact Dominic Maxwell: 202 906 9839 or dmaxwellmd@gmail.com

BETHESDA: Offices for rent in psychotherapy suite carefully following CDC guidelines for safe opening. Furnished and unfurnished space available. Flexible term. Free WiFi, beverages, color copier. Very friendly and professional clinicians. Contact Keith Miller: 202-360-9996 or keith@keithmillercounseling.com.

Continued on next page!

Child and Adolescent Outpatient Psychiatry: Grace Medical Center Lifebridge Health (West Baltimore)

Seeking a highly engaged physician to join our team: (Valid Maryland license, DEA and CDS license required)

- Report to the Medical Director of Outpatient Behavioral Health
- Provide psychiatric evaluation and treatment services to patients in the outpatient behavioral health program and partial hospitalization program (PHP)
- Provide patient care to patients five years and older
- Perform initial evaluations on all psychiatric patients assigned within required timeframes as applicable by internal and external standards that may fluctuate from time to time
- Prescribe appropriate studies, consultations, interventions, treatments and medications
- Support and guidance in case consultations available from other child psychiatrist(s)
- Provide medication management services and documents progress in coordination with the treatment team
- Review psychiatric care with a team consisting of therapists, nurses, the patient, other members of the treatment team as applicable, and with psychiatry or hospital leadership as-needed
- Conduct individual, couple and family meetings as indicated
- Maintain clinical competency by attending educational programs and completing licensing requirements.

This opportunity offers many perks including sign on bonus, full benefits, Flexible Spending Accounts (FSAs), free parking, 403(b) retirement plan, 457(b) Deferred Compensation Plan, fully stocked Physician lounge, 2 weeks CME, and Life Insurance.

To apply please visit lifejobs.org or email Devyn Kern, CPRP, Director of Physician Recruiting and Onboarding at dekern@lifebridgehealth.org. To learn more about LifeBridge Health please click here: <http://www.lifejobs.org/LifeJobs/providerrecruitment.aspx>

Chief Medical Officer



Brook Lane Health Services in Maryland is seeking a full-time board certified Child and Adolescent Psychiatrist (preferred C&A certified) to fill the position of Chief Medical Officer. Brook Lane Health Services provides a continuum of mental health services over four locations and telehealth for people throughout the Mid-Atlantic region. We offer a variety of behavioral health services for all age groups including Inpatient Hospital, Partial Hospitalization programs, Outpatient clinics, Residential congregate care, and Special Education Schools.

Requirements include Board Certification in Child and Adolescent Psychiatry meeting medical and allied clinical staff rules and regulations for active staff membership, a minimum of three to five years of relevant clinical and organizational leadership experience in a hospital or health care institution. Brook Lane is located just outside of the Baltimore/Washington DC metro area. Brook Lane offers competitive compensation and a benefits package which includes annual leave accrual, CME assistance and leave, Medical, dental, vision insurance, Basic life and disability insurance, 401(k) retirement plan and matching.

Full description is available at www.brooklane.org career opportunities. Online application and CV submission is available under Chief Medical Officer posting on the career center. If you prefer to apply by email, please send CV and letter of interest to humanresources@brooklane.org.

Rewarding Opportunities for Psychiatrists Across Maryland

SHEPPARD PRATT IS SEEKING PSYCHIATRISTS TO WORK ACROSS MARYLAND IN A VARIETY OF TREATMENT SETTINGS, INCLUDING OUR STATE-OF-THE-ART BALTIMORE/WASHINGTON CAMPUS OPENING IN JUNE.

CURRENT OPENINGS INCLUDE:

Inpatient: Child & Adolescent Service Line Service Chief, Adult Service Line Service Chief, Trauma Disorders Service Chief, Adult, Child & Adolescent, Eating Disorders, and Geriatric

Crisis Assessment Services: Medical Director

Residential: Medical Director - The Retreat, OCD Psychiatrist - The Retreat

Consultation-Liaison

Medical Education Services

Southern Maryland: Medical Director, Adult, Child & Adolescent

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?

- Physician-led organization
- Generous compensation package with comprehensive benefits, including medical, dental, vision, and life insurance; an extensive wellness program; and ample leave
- 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

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

About Sheppard Pratt

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



Sheppard Pratt



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\$150,000

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KATHI HEAGERTY, BSN, JD
SENIOR LITIGATION SPECIALIST

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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.



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Centurion Health is a leading provider of comprehensive healthcare services to correctional facilities nationwide. We are proud to be the provider of mental healthcare services to the Maryland Department of Public Safety and Correctional Services.

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Chief Psychiatrists for correctional
facilities in these Maryland locations:

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We offer competitive compensation and a comprehensive benefits package including:

- Health, dental, vision, life, and disability insurance
- 28 paid days off per year + 7 paid holidays
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