# MPS NEWS

Volume 35, Number 9 Editor: Heidi Bunes January 2022

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Deadline for articles is the 15th of the month preceding publication. Please email <a href="heidi@mdpsych.org">heidi@mdpsych.org</a>.

MPS News Design & Layout Meagan Floyd

The MPS Council will meet by videoconference on January 11th at 7:30 PM. All members welcome!

President's Column

# **Happy 2022**

Happy New Year from the executive committee and staff and MPS. We hope the holidays allowed for some time to reboot! As we look to the spring, we still have concerns about the virus spreading with unmasked events. We are continuing Council meetings by Zoom. The annual meeting, a usually fun social event, is scheduled for April. Right now, it looks like the meeting will be virtual.

A year ago, we were worried about the slow roll out of the vaccine. Today most of us are vaccinated and boostered as are most of our families. This gives us some peace of mind from last year when we did not yet have vaccines. It is still a push to get all our patients vaccinated. Data from the <u>December BHA update</u> show that almost 80% of the statewide population is fully vaccinated, while the rate drops to less than 50% for individuals served in the public behavioral health system. I have several paranoid patients who are refusing to get vaccinated. These are people who do not get flu shots. As a physician I feel I am obligated to continue to work on their paranoid beliefs and try to avail them of the benefits of vaccination. The unpredictability of the virus continues to feed their paranoid thinking. So far fixed beliefs remain fixed. Of course, there are disadvantaged individuals who are still having trouble navigating getting the vaccine for a variety of reasons. Living in Maryland is a gift as we are a more vaccinated state than some. I will continue to poke holes in disordered thinking as no medication seems to be a panacea!

To follow up on my last column, as of December 21 there is a one-year waiver available for those who do not eprescribe for

CDS. MDH has not announced the quantity that defines low volume prescribers. Prescribers who are unable to electronically transmit prescriptions for controlled dangerous substance drugs should request a waiver by January 1. All requested waivers will be granted for 2022 only. Click here for more details. This is a welcome but very late development that the MPS worked for months to clarify.

In January we are looking forward to the APA election which is open for voting January 3<sup>rd</sup> through the 31<sup>st</sup>. There are three MPS members on the ballot for different positions so look on the 2022 APA election webpage for information about the candidates. The MPS is proud to have involved and active members. In addition to being an active District Branch working at the state level, we have members who provide leadership at the national level. Exercise your right for democracy and vote your choices.

Ginger Ashley, M.D.

# 2022 MPS Dues

The MPS sent 2022 dues invoices by email and USPS. Dues remain the same as last year! If you haven't already, please renew your annual membership by paying your dues:

- Mail your check made payable to "MPS" to 1101 St Paul Street, Ste 305, Baltimore, MD 21202 -OR-
- Pay online using a debit or credit card or Paypal account at <u>this link</u> or via your MPS member account.

If you have not received an invoice, or if you have questions or concerns please email <a href="mailto:mps@mdpsych.org">mps@mdpsych.org</a>.

# LAST CALL for Nominations! Anti-Stigma Advocacy Award

The annual Maryland Foundation for Psychiatry (MFP) **Anti-Stigma Advocacy Award** recognizes a worthy piece published in a major newspaper that accomplishes one or more of the following:

- Shares with the public their experience with mental illness in themselves, a family member, or 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.

A Maryland author and/or newspaper is preferred. <u>Click here</u> for past winners and published articles.

The award carries a \$500 prize to be given at the Maryland Psychiatric Society annual meeting in April. To nominate a piece to be considered for the 2022 award, email it to <a href="mailto:mfp@mdpsych.org">mfp@mdpsych.org</a> no later than January 10, 2022. The article should be published during the period from January 15, 2021 to January 10, 2022.

#### Poster Contest for Residents & Fellows

The MPS poster competition for our Resident-Fellow Members will be held again this year, with all entries displayed at our annual meeting in April 2022! Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a **\$200 cash prize** as well as a complimentary ticket to the meeting. Two finalists will also be selected and will receive **\$100 each** in addition to complimentary tickets.

The winners in past years are listed <a href="here">here</a>. Please <a href="click here">click here</a> for complete details about the process and requirements. <a href="The deadline">The deadline to enter is January 31</a>. Electronic copies of posters are due <a href="February 10">February 10</a>. For more information, or to apply please <a href="click here">click here</a>.

#### COVID-19 State of Emergency

On January 4, Governor Hogan declared a <u>state of emergency</u> due to the surge in coronavirus cases and admissions. He also issued orders to <u>augment the EMS workforce</u> and to <u>expand hospital staff and capacity</u>. On December 10, Maryland Health Secretary Schrader issued amended order <u>MDH 2021-12-10-01</u> addressing pandemic-related topics, for example COVID-19 testing and reporting and healthcare facilities. On December 17, the Board of Physicians posted <u>emergency regulations</u> to provide flexibility for physician staffing. For those practicing in a Maryland facility, the regs provide for reinstatement of physician licenses that expired or were inactive in 2021 or were initially licensed by reciprocity. The changes will end June 30, 2022 or when the federal public health emergency ends, whichever is first.

# MPS Best Paper Awards Deadline January 31

To recognize outstanding scholarship by young psychiatrists in Maryland, in 2013 the MPS established annual "best paper" awards. Previous winners are listed <a href="here">here</a>. The Academic Psychiatry Committee is currently soliciting nominations for the 2021 Paper of the Year Award in two categories:

Best Paper by an Early Career Psychiatrist Member (ECP): Eligible psychiatrists are ECP members who are first authors of papers published or in press in 2021. Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a \$200 cash prize as well as a complimentary ticket to the MPS annual dinner in April 2022.

#### Best Paper by a Resident-Fellow Member (RFM):

Eligible psychiatrists are Resident-Fellow members who are first authors of papers that were written, in press, and/or published in 2021. Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a **\$200 cash prize** as well as a complimentary ticket to the MPS annual dinner in April 2022.

**Best Paper by an Medical Student Member**: Eligible psychiatrists are Medial Student Members who are first authors of papers published or in press in 2021. Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a **\$200 cash prize** as well as a complimentary ticket to the MPS annual dinner in April 2022.

Scholarly work of all kinds (e.g., scientific reports, reviews, case reports) will be considered. If you would like to nominate a paper and author, please email or mail the paper as indicated below by **January 31**. Please include a brief explanation of why you believe the work is worthy of special recognition.

Jennifer M. Coughlin, M.D.
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Baltimore, MD 21287
jcoughl2@jhmi.edu / mps@mdpsych.org

#### Member Publications

Congratulations to **Zachary Cordner**, **M.D.**, **Ph.D.**, the Alexander Wilson Schweizer Fellow in Mood Disorders in the Johns Hopkins Department of Psychiatry. Dr. Cordner's first-author manuscript was published in the September 10, 2021 *Neurobiology of Stress*. The manuscript is titled, "<u>Fluoxetine and environmental enrichment similarly reverse chronic social stress-related depression- and anxiety-like behavior, but have differential effects on amygdala gene expression."</u>

#### 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 K. Ackerman, M.D. Sandra Ahn Brandon J. Birckhead, M.D. Kathryn V. Blair, M.D. Barry Bryant, M.D. Helen Bradshaw, M.D. Sarah C. Collica, M.D. Carolyn Craig, M.D. Adam A. D'Sa, M.D. Candice Espinoza, M.D. Samuel M. Fels, M.D. Cyrus R. Gilbert, M.D. Evelyn Gurule, M.D., Ph.D Megan Hosein, M.D., MPH George F. Lasker, M.D., Ph.D. Brian J. Lee, M.D., Ph.D. Kevin Li, M.D. Zoe I. Luscher, M.D. Michelle L. Miller, M.D. Sasha K. Narayan, M.D. Christian A. Romanchek, M.D. Tulha D. Siddiqi, M.D. Bryce Small, M.D. Elizabeth Steuber, M.D. Arman Terzian, M.D. William Tobolowsky, M.D. Nathan Yueh, M.D. Jessica J. Yang, M.D. Hadas Zachor, M.D. James C. Zinko, M.D.

#### **Transfer Into Maryland**

Adolfo Gustavo Flores Fortty Sr, M.D.

#### Reinstatement

Zhuoheng Deng, M.D.

## SAMHSA Harm Reduction Grant Funding

Applications are being accepted for the first-ever SAMHSA Harm Reduction grant program with an expected \$30 million in total awards. SAMHSA will accept applications from State, local, Tribal, and territorial governments, Tribal organizations, non-profit community-based organizations, and primary and behavioral health organizations. Click below for:

- Press release
- Information about Harm Reduction
- Apply for this grant

# Maryland News

## Important Update on eRx for CDS

On December 21, the Maryland Department of Health (MDH) Office of Controlled Substances Administration (OCSA) announced that health care practitioners must apply for a waiver by January 1, 2022 if they do not prescribe Controlled Dangerous Substances (CDS) electronically. OCSA said compliance actions will be delayed until January 1, 2023.

Healthcare practitioners who prescribe CDS must do so electronically OR apply for a waiver (with limited exceptions). All requested waivers will be granted for calendar year 2022 only. To confirm that an electronic prescribing waiver is approved and in effect for a prescriber, visit the online waiver verification page.

To apply for a waiver, visit the OCSA webpage <u>Electronic Prescribing Waiver Request</u>, which has instructions, a link to the application, and a list of circumstances when a waiver or electronic prescribing are not required.

#### **Background**:

Effective January 1, 2022, <u>Senate Bill 0166 (CH0299)/House Bill 0512 (CH0230) (2020) Drugs and Devices – Electronic Prescriptions – Controlled Dangerous Substances</u> requires licensed health care providers in Maryland to electronically prescribe prescriptions for controlled dangerous substances and allows waivers to be granted under certain circumstances. However, on November 2, 2021 compliance actions for the comparable federal law were <u>delayed by CMS</u> to January 1, 2023, based on stakeholder feedback. In response, MDH is also delaying compliance actions to January 1, 2023.

To maintain compliance with the Health General Article, §21-220(C) requirement to implement e-prescribing on January 1, 2022, a health care practitioner who is unable to electronically transmit prescriptions for controlled dangerous substance drugs must request a waiver. All requested waivers will be granted for 2022 only.

MDH has not announced the number of prescriptions that exempt a practitioner from electronic prescriptions under the low volume provision in the law, so as of now the available option is to apply for a waiver.

#### CRISP Annual User Summit

The free virtual CRISP Annual Summit will be Thursday, **January 13** from 8:45 AM to 4 PM with information sessions and expert presentations covering How can health IT promote health equity, What's next for the TCOC Model, Health IT Supporting Opioid Response Efforts, Public Health Tools Beyond COVID, etc. <u>Click here</u> for the agenda and sessions. <u>Click here</u> to register.

# Maryland News

#### Pre-Filed Bills of Interest

The mental health toll of the COVID-19 pandemic has become increasingly undeniable. Polling shows that nearly 1 in 5 Americans report having a mental illness. Further studies show that the pandemic has only increased this number. Many in the legislature hope to address this trend and are currently drafting legislation. Some legislators have prefiled legislation as you will see from the pre-filed bills highlighted below:

- Senate Bill 2/House Bill 32 would authorize a petition for emergency evaluation to be in the form of an electronic record. The bill defines electronic record as "a document created, generated, sent, communicated, received, or stored by electronic means."
- Senate Bill 4/House Bill 24 would establish the Maryland Suicide Fatality Review Committee to identify and address the factors contributing to suicide deaths and facilitate system changes in the State to prevent suicide deaths. This will be the third year that this bill has been introduced.
- House Bill 118 would establish that a student's absence due to mental health needs is a lawful absence from public school attendance. A local board of education must excuse an absence due to a student's mental health needs, provided that a student who is a minor has permission from their parent or guardian for the absence. A local board may not require a note from a physician to excuse such an absence. Under the bill, a student who is absent due to mental health needs must meet with a school mental health specialist within an appropriate period of time, as determined by the local board, to discuss the student's mental health needs.
- House Bill 97 would establish a workgroup to identify and study the shortage of behavioral health professionals in the State who are Black, Latino, Asian American Pacific Islander, or otherwise underrepresented in the behavioral health profession. The workgroup must also assess and make recommendations on incentives or other methods to increase the number of (1) specified or underrepresented students who study at an institution of higher education in the State to be behavioral health professionals and (2) specified or underrepresented behavioral health professionals who provide behavioral health services in the State, especially in underserved communities.

# 2022 General Assembly Guidelines

**House Guidelines:** During the 2022 session, the House of Delegates Office Building will be open to the public; however, all committee proceedings will be conducted virtually. Receptions or large gatherings in the House Office Building, including lobby days, are prohibited.

Bill hearings on pre-filed legislation will begin in earnest on January 13, 2022. Witnesses can individually sign-up to testify through the Maryland General Assembly website 48 hours before the bill hearing beginning at 10 AM and closing at 3 PM. Like last session, witnesses can sign up on Thursdays for Monday hearings and Fridays for Tuesday hearings. The House standing committees will cap bill hearings at a maximum of 50 witnesses per bill. The witness sign-up software will not allow witnesses to sign up as a panel.

Subcommittee meetings and full committee voting sessions will generally be livestreamed through the <u>Maryland General Assembly website</u>.

Senate guidelines are still pending as of press time.

# Congratulations!

With MPS recommendation, the APA has advanced the membership status of the following MPS members.

#### **New APA Distinguished Fellows**

This status reflects exceptional abilities, talents, and contributions to the psychiatric profession.

Kim Bright, M.D. Nancy Diazgranados, M.D. Kenneth Stoller, M.D.

#### **New APA Fellows**

Sharen Bisson, M.D.
Hanita Chhabra, M.D.
Maciej Chodynicki, M.D.
Lashire Diegue, M.D.
Yuelei Dong, M.D.
Xiu-Di Fan, MD, Ph.D.
Aliya Jones, M.D., M.B.A.
Ronald Lee, M.D.

Carmen Lopez-Arvizu, M.D.

Amy Lowe, M.D. Lauren Osborne, M.D. Corneliu Sanda, M.D. Lori Schwartz, M.D. Yakir Vaks, M.D. Robert Wisner-Carlson, M.D.

Helen Witte, M.D. Michael Young, M.D. Deval Zaveri, M.D.

Congratulations to all on reaching this milestone!

# Maryland News

## Key General Assembly Dates

The Maryland General Assembly will convene at noon on January 12. Several key dates of interest include:

- January 19: Final date for Governor to introduce budget bill and capital budget bill
- February 4: Any House bills introduced after this date will be referred to the House Rules and Executive Nominations Committee
- February 7: Any Senate bills introduced after this date will be referred to the Senate Rules Committee
- March 21: Opposite Chamber Bill Crossover Date Each Chamber must send to other Chamber those bills it intends to pass favorably Opposite Chamber bills received after this date subject to referral to Rules Committees
- April 4: Budget bill to be passed by both Chambers
- April 11: Adjournment "Sine Die"

## BHA Crisis System Update

The crisis care continuum is being developed based on 6 regions: Capital, Central, Lower Eastern Shore, Mid-Eastern Shore, Southern and Western. BHA met with LBHA directors in the Western Region to begin discussing the development of the Facilities Master Plan Comprehensive Crisis Center in Washington County.

BHA was invited by the Maryland Institute for Emergency Medical Services Systems (MIEMSS) to join the Crisis Scene Collaboration Workgroup. The purpose of the workgroup is to improve collaboration between law enforcement and emergency medical services when responding to a person in a behavioral health crisis.

Best Practices/Standardization - BHA is working with GBRICS and the University of Maryland Innovations Institute to develop definitions and practice standards for crisis services. Data Infrastructure/Dashboard - A crosswalk of various crisis screening tools was completed. The Crisis Assessment Tool (CAT) will be used as the state recommended screening tool. This tool will be implemented and used in the mobile response (crisis) teams and urgent care centers.

Two Notices of Funding Availability were issued to the local behavioral health departments and core service agencies to provide support for a regional crisis system using the nationally recognized Care Traffic Control model. The other award supports the establishment of an urgent care center preferably in a rural region of the state.

From <u>December 2021 Behavioral Health Deputy Secretary</u>
<u>Monthly Update</u>

## MedChi 2022 Legislative Priorities

As the statewide professional association advocating for all licensed physicians, MedChi has announced its priorities for the current year, including:

- Protecting Access to Physician Services and The Practice of Medicine
- Ensuring Timely Delivery of Health Care Services and Payment
- Protecting the Practice of Medicine
- Addressing Behavioral Health Treatment and Recovery Needs
- Strengthening Public Health Initiatives

For details related to the above bullets, please see this link.

MedChi will also focus on:

- Addressing Burdensome Prior Authorization Requirements
- Funding for the Maryland Loan Assistance Repayment Program for Physicians and Physician Assistants (LARP)
- Protect Medicaid Access Restore Parity with Medicare for E&M Code Payments

Please email Meagan at <a href="mailto:mfloyd@mdpsych.org">mfloyd@mdpsych.org</a> for talking points if you want to bring these concerns to the attention of your elected officials. In this election year, legislators are even more interested in hearing from and supporting constituents.

## General Assembly Changes of Note

There are a few notable changes to the General Assembly for 2022. The Senate Finance Committee remains unchanged, although Chairwoman has announced that she will not seek reelection in next year's election. The Senate Judiciary Committee has one new member, Senator Ron Watson, a Democrat from Prince George's County.

On the House Health Government Operations Committee Chairwoman Shane Pendergrass announced that will not seek reelection in 2022. The Committee also has two new members: Delegate Anne Kaise, a Democrat from Montgomery County and former chairwoman of the House Ways & Means Committee and newly appointed Delegate Cheryl Landis, a Democrat from Prince George's County.

## MHAMD Issues Survey

The Mental Health Association of Maryland is surveying statewide to gather data about which mental health and substance use issues, including access, quality, populations, etc, are most important to the public. Feedback will inform their advocacy efforts for the upcoming election and beyond. Click here to participate.

# Maryland News

# Changes to IMD Admissions

Effective January 2022, restrictions on admissions of Medicaid patients aged 22 and 64 to Institution for Mental Disease (IMD) facilities will be greatly reduced. (IMDs are freestanding psychiatric hospitals, including Sheppard Pratt and Brook Lane.) New guidelines went into effect on December 17. Acute hospital psychiatric units and Emergency Departments can now transfer an individual for admission <u>directly</u> to an inpatient psychiatric IMD. The referring facility is no longer required to attempt and fail to transfer to other psychiatric units in acute/general hospitals. This change will improve access and reduce holding time for those individuals best treated in a psychiatric facility. <u>Click here</u> for details.

#### BHA Year in Review

Deputy Secretary Behavioral Health Aliya Jones, M.D. included highlights of 2021 Behavioral Health Administration accomplishments in her <u>December monthly partner letter</u>. It was a busy year that included work on:

- State Opioid Response
- 1915c Waiver for Individuals with Brain Injury
- Behavioral Health Equity
- Certified Peer Recovery Specialist training for incarcerated citizens
- Operation Roll Call for Veterans
- Operation Courage for Frontline Workers and First Responders
- Behavioral Health Webinar Series
- Keeping Our Kids Safe Toolkit
- MD Mind Health
- Adverse Childhood Experiences (ACES)
- Telehealth Equipment Program Pilot
- Specialized Residential Rehabilitation Programs
- Family Peer Support
- Specialized Behavioral Health Assisted Living Programs
- Review of current civil commitment laws and the definition of dangerousness and grave disability

Looking to next year, BHA work will include:

- Planning and launch for the Mental Health and Substance Use Disorder Bed Registry and Referral Program
- Expanded capacity of Residential Treatment Center to serve adolescents with complex support needs
- Development of an Urgent Care Center, expansion of Peers in Urgent Care Centers, and launch of the Care Traffic Control Software Platform aligned with the Greater er Baltimore Regional Integrated Crisis System pilot
- Community-based mobile crisis intervention services under the Medicaid program

For more details, please see the partner letter.

# Parity Compliance Reporting Requirements Finalized.

The Maryland Insurance Administration (MIA) has <u>adopted</u> a new chapter, COMAR 31.10.51 Mental Health Benefits and Substance Use Disorder Benefits—Reports on Nonquantitative Treatment Limitations and Data effective December 27, 2021. This action was proposed in the October 22 Maryland Register. <u>Click here</u> to view the draft regulation.

#### BHA-MedChi Webinars

The Behavioral Health Administration and MedChi webinar series, *Helping the Helpers and Those They Serve*, is for behavioral health and medical providers of all disciplines in both community and hospital settings. They enhance health care worker self-care and the care they provide by addressing the pandemic, social justice issues, and other stressors. **CME credits are free**. Recordings and slides are archived on the BHA/MedChi webinar page. Programs run **5 to 6 PM**:

**January 13:** <u>Cultivating Compassion and Resilience for Yourself and Those in Your Care</u>

Beth Terrence, M.S. Moderator: TBD.

**January 27:** Empathy Fatigue During the Pandemic Mona Masood, D.O. Moderator: Hinda Dubin, M.D.

# **CHRC** Funding Opportunity

"The Maryland Health Equity Resource Act," passed during the 2021 legislative session, provides new grant funding and state resources for communities to address health disparities, improve health outcomes, expand access to primary care and prevention services, and help reduce health care costs. In January the Maryland Community Health Resources Commission (CHRC) will release a new RFP with \$7 million in funding. Applications will be due in March. Behavioral Health and Opioids, highlighting the racial disparities in overdose rates, is one of three designated focus areas. For CHRC email updates, email jen.thayer@maryland.gov.

## 2022 Virtual MHAMD Legislative Briefing

On **February 17 at 3 PM**, the Mental Health Association of Maryland will hold its annual Legislative Briefing, bringing together hundreds of behavioral health professionals, business, and nonprofit leaders, concerned citizens, and legislators to learn about policy issues that will impact Marylanders' mental wellbeing. This year's event is free to all. For more info email <a href="mailto:aseney@mhamd.org">aseney@mhamd.org</a> or call 443-538-3970.

# Maryland News

# Proposed VPA Legislation

The Maryland Children's Behavioral Health Coalition is exploring legislation to expand the current Voluntary Placement Agreement (VPA) process to better serve the needs of children, families, and providers. After reviewing this information, the Coalition hopes to move forward with proposed legislation for the 2022 General Assembly. To reduce hospital overstays, support families facing economic hardship, and address the inequitable distribution of and access to services based on a child's educational needs, the Coalition proposes:

- The child's parent or guardian shall not be required to make child support payments while their child is in a VPA
  - -MSDE will pay for any educational components of a placement.
  - -Medicaid will pay for everything that is Medicaidreimbursable.
  - -DHS will pay for anything not covered by MSDE or Medicaid.
- Placement options for a child should include, but not be limited to:
  - -Residential treatment centers
  - -Diagnostic facilities
  - -Qualified residential treatment programs
  - -Therapeutic group homes
  - -Intensive group homes
- The Local DSS can only require interventions for the level of care the child needs based on medical necessity.

#### Prevention Initiative for Youth

December 10 marked the launch of MD Young Minds, a text-based mental health initiative geared towards youth and young adults to help fight isolation, encourage mental wellness, and provide tools for peer and self-assessment. Text messages sent through the program provide supportive youth-focused mental health messages, but also remind recipients that immediate access to mental health services is available. This service reaches Spanish speakers through MDSalud. If in distress, individuals can call 2-1-1, chat through the 2-1-1 website (pressone.211md.org), or text 898-211. All actions will link the individual to a call specialist available 24/7. Young Marylanders can text MDYOUNGMINDS to 898-211 to sign up.

# Maryland Preferred Drug List Effective January 1

The Office of Pharmacy Services issued <u>Advisory #237</u> outlining changes effective January 1 to the generic vs. brand status of the <u>Maryland Preferred Drug List</u> (PDL). Several Central Nervous System drugs on the PDL are affected, including ones from anticonvulsant, antidepressant, and stimulant categories. Please visit the <u>Maryland Medicaid Pharmacy webpage</u> for the complete PDL and Brand Preferred over Generic List.

#### Youth Suicide Prevention Toolkit

The Maryland Office of Suicide Prevention has developed a toolkit, "Keeping Our Kids Safe," to address youth suicides. This toolkit is primarily for professionals and adults who work with youth, but it is also appropriate for teens looking to learn more about how to ask for help. **Download the toolkit** <a href="height: here">here</a>, which includes:

#StoriesofHope Social Media Campaign and Sample Social Media Messaging

#### Fact Sheets:

- Supporting People with Lived Experience
- Warning Signs of Suicide
- Risk Factors of Suicide
- Health Risk Factors of Suicide
- Protective Factors of Suicide
- Groups at Elevated Risk of Suicide
- R.A.C.E. for Suicide Prevention
- Lethal Means Safety

#### Protecting Youth Mental Health

U.S. Surgeon General Vivek Murthy, M.D., M.B.A. issued an advisory on December 7 calling attention to the urgent public health priority of youth mental health. It provides background information for both pre-pandemic and COVID-19 impacts, and includes recommended actions for several types of groups to help address the mental health crisis. "This is the moment to demand change—with our voices and with our actions."

#### AAP Interim Guidance

The American Academy of Pediatrics has updated its <u>guidance</u> for supporting pediatric mental health to reflect the challenges of the ongoing pandemic and to support the <u>AAP-AACAP-CHA Declaration of a National Emergency in Child and Adolescent Mental Health</u>. The guidance notes that social health determinants, such as family housing, employment, or food insecurities, may cause additional stress on children, in addition to other factors. It includes advice on management of patients and considerations for referral and follow-up.

# Further Details on Recoupment

On December 13, Optum alerted providers to further details on recoupment of retro-eligibility and overpayments. Please <u>click here</u> for the communication.

# **APA News & Information**

# December APA Board of Trustees Highlights

The APA board met on December 11, 2021, and again on December 21. I will try to summarize the actions, but some the items might warrant a visit to the APA website. The website itself was an item for discussion; an upgrade is in the works. The psychiatry.org upgrade will help to broaden its reach to persons with disabilities, improve the site's search function, and refresh its overall look and feel. Psychiatry.org has seen significant success over the last five years since its previous major upgrade. Traffic has grown from six million pageviews in 2016 to 40 million in 2021, much of it driven by patient-centric content on the site. The upgrade is on track to launch by the end of the first quarter of 2022.

Members will find important info on the site, such as APA position statements, which are being reviewed and updated for brevity and clarity. Positions must be approved by both the Assembly and the Board to become official policy, and cover a variety of topics. At this meeting we approved statements on location of civil commitment hearings; sexual harassment; patient access to electronic medical records; offlabel treatments; college and university mental health; immigration, children, adolescents and their families; mental health impact of public health emergencies on young people; racism and racial discrimination in the psychiatric workplace; psychiatric services in adult correctional facilities; moral injury among health care workers during a public health crisis; core principles for alternative payment models for behavioral health; medical supervision of psychiatric residents and fellows; telemedicine in psychiatry; any willing physician; trial sentencing of juveniles in the criminal justice system; and civil commitment of minors. We sent back others for further review.

I mention all of these because so much happens at APA that members are unaware of. The position statements guide our advocacy efforts and take a lot of time to get right. Please visit the <a href="website">website</a> for the full text of these and other APA guidance documents. They are worth reading; many of your colleagues spent much time crafting them.

The December meeting is set aside for the annual budget, which was presented and approved. We are on track to meet conditions of our building purchase agreement with calls for a balanced operating budget by 2023. Our reserves are strong, thanks in part to a favorable market, but also to efforts by our administration to streamline operations; Dr. Levin and his staff are to be congratulated.

One item which continues to confound is the Annual Meeting, which Dr. Cathy Crone and the Scientific Program Committee are working to bring to us, in person, in New Orleans. We are watching other organizations negotiate the virtual vs

in-person decision making, and have contingencies in mind, but all efforts are underway for in-person.

The board approved a number of awards, including Stacey Abrams to receive the APA Chester M. Pierce Human Rights Award. There were appointments to editorial boards, membership advancements, dues waivers and resignations. An advisory group on Risk Management was appointed as we try to foresee threats. APA will no longer host district branch websites, due to concerns over liability for content and the need to keep boundaries clear; district branches who are in need can apply for assistance. APA has a new Chief Information Officer, Stefani Keuser to help manage cyber-threats.

The board heard reports from the Structural Racism Accountability Committee and the task force on Social Determinants of Mental Health, as well as discussion of advocacy efforts concerning psychologist prescribing, Medicare reimbursement, the "No Surprises Act", increase in GME slots, the Clozapine REMS updated program and its problems, among other issues.

A special executive session discussed APA receipt of ABPN grants. ABPN has offered \$1M to support the Registry, with an eye toward helping with outcome measures that we all need; as well as \$1M to develop CME content that diplomates can access regardless of APA membership. The strong feelings many members have, especially concerning MOC and ABPN fees, warranted a prolonged discussion of the merits of accepting such offers. After a very spirited debate, the board voted to approve acceptance.

Again, please visit <u>psychiatry.org</u>. While you're there, consider donating to the <u>APA foundation</u> and the APA PAC. You'll be glad you did.

Kenneth Certa, M.D. APA Area 3 Trustee

#### **FREE APA Course of the Month**

January Course of the Month – Food for "Thought":

Mindful Nutrition and Mental Health: The role of food in physical health has been known for a long time, but the role diet plays in psychiatry is unexplored and underdeveloped. This course will explore the various ways in which diet affects the mind and brain, explain the presence and detriment of food access as it relates to mental health, propose a standardized "Rules of Food Hygiene," and focus on how the microbiota influences our cravings and health. Click here to access the Course of the Month and sign up for updates about this free member benefit.

# **APA News & Information**

#### 2022 APA Election

**APA voting members may cast their ballots from January 3 to January 31**. Look for your emailed ballot or vote at <u>psychiatry.org/election</u> by logging in with your user name and password.

Three MPS members are on the slate this year: **Jimmy Potash**, M.D., M.P.H. (President-Elect), **Geetha Jayaram**, M.D., M.B.A. (Area 3 Trustee), and **Mark Komrad**, M.D. (Area 3 Trustee).

All campaigning is via APA-managed activities, including the 2022 Election Newsletter with candidates' platforms, and a series of town halls with the candidates that were held in December. Town Halls have been recorded and posted for members who were unable to attend. Use of APA listservs for campaigning is not permitted. Visit the Election page for more details.

# My Mental Health Crisis Plan App

The My Mental Health Crisis Plan app, which allows individuals who have serious mental illness to create a psychiatric advance directive that guides their treatment during a mental health crisis, was named Best Health Care Mobile Application in the 2021 MobileWebAwards. The app was developed by SMI Adviser, an initiative funded by SAMHSA and administered by the APA. Click here for more info.

#### **Break the Ice**

A virtual event exclusively for Residents & Fellows

#### Wednesday January 12 7:30-9:00 PM

What: Bring your favorite snacks and drinks and join APA resident and fellow physicians for an evening of fun icebreaker games!

Who: This event is exclusively for psychiatry residents and fellows

# **Click here to register!**



#### No Surprises Act Info from APA

As of January 1, federal regulations require certain patient protections to address concerns about surprise bills. These protections address emergency care as well as disclosure requirements for all uninsured or self-pay services, and will, at some point in the future also include patients with insurance. The regulations formalize some of what psychiatrists already do when communicating fees to patients. The APA posted a <u>summary of the key requirements</u> along with links to templates. If you have questions, please contact Maureen Maguire, JD, APA Associate Director – Parity Compliance and Enforcement, at <u>MBailey@psych.org</u>. Members can also email <u>practicemanagement@psych.org</u> with specific questions.

#### Attention RFM Members

The 2021-2022 APA/APAF Fellowship application cycle is open. Fellowships are a great opportunity for RFM experiential learning, training, and professional development. To apply or learn more about the eight Fellowships, visit <a href="https://apply.psychiatry.org">https://apply.psychiatry.org</a>. The application deadline for APA/APAF Fellowships is January 31, 2022. The application deadline for the SAMHSA Fellowship is February 14, 2022.

#### 988 Coming in July

The 988 dialing number for the National Suicide Prevention Lifeline will launch in July. Hopes are that via this easy-to-remember, three-digit number the existing Lifeline network will be strengthened and expanded, and the public will have easier access to life-saving services. The 988 code is a first step toward transforming crisis care, creating a universal entry point to crisis services in line with access to other emergency medical services. SAMHSA will support 988 efforts with a \$282 million investment across the country, including:

- \$177 million to strengthen and expand the existing Lifeline network operations and telephone infrastructure, including centralized chat/text response, backup center capacity, and special services (e.g., a sub-network for Spanish language-speakers).
- \$105 million to build up staffing across states' local crisis call centers.

Funding for 988 Readiness

- 988 page
- Grant announcement
- Apply

Click here for more details.

# AMA News & Information

# No Surprises Act Starts January 1

HHS has released template documents to help providers comply with the No Surprises Act, which protects patients who get emergency care or get treated by an out-of-network provider at an in-network hospital or ambulatory surgical center from balance billing. The Act requires these providers to give patients a good faith estimate of expected charges. Following are two of the recommended forms for use **beginning January 1**:

- Standard notice & consent forms for nonparticipating providers & emergency facilities regarding consumer consent on balance billing protections (<u>Download Surprise Billing Protection Form</u>) (<u>PDF</u>)
- Model disclosure notice on patient protections against surprise billing for providers, facilities, health plans and insurers (Download Patient Rights & Protections Against Surprise Medical Bills) (PDF)

## JAMA Psychiatry Editorial Fellow Position

A 2-year editorial fellowship position *JAMA Psychiatry* with a small stipend is open to psychiatrists who are no more than 10 years from their completion of residency/clinical fellowship. Applicants should have an academic position and research experience. The fellow will receive training in editorial processes and policies of a psychiatry journal and will be prepared to take an editorial role in a peer-reviewed journal at the end of the fellowship. The application **deadline is**January 15. Click here for details.

#### AMA Advocacy on Patient Privacy

The AMA released a guide to equitable digital health data collection for health apps, making a case for privacy in app design. Some health apps may collect sensitive information yet are not subject to HIPAA. The AMA's health data privacy framework calls for controls that establish transparency as to how health information is being used, who is using it, and how to protect patient data. Psychiatrists are reminded that they can use the guidelines in the APA's App Advisor when they recommend apps to patients.

## **PRMS Risk Management Resources**

As 2022 begins, PRMS is sharing its <u>Self-Audit</u> resource with strategies to improve patient safety and decrease potential liability. Another resource, <u>Case of the Quarter</u>, has examples written by the PRMS Claims Department that highlight best practices for psychiatrists based on real world scenarios.

## AMA and AHA Suit on No Surprises Act

The AMA has joined the American Hospital Association in asking the courts to ensure that the dispute-resolution provisions of the No Surprises Act reflect a balanced, equitable process for settling payment disputes. The AMA continues to support patient protections in the Act against unanticipated medical bills. The lawsuit seeks to change only one aspect of the regulations put forward by the feds in the fall. In essence, the implementation of the No Surprises Act dispute resolution process set to take effect January 1, 2022 skews the outcome in favor of insurance providers by artificially deflating payment rates for physicians. Federal regulators would unlawfully force arbiters to assume the median in -network rate is the appropriate out-of-network rate, while limiting when and how other factors may be considered. Commercial insurers can be expected to exploit the fact they have little or no incentive to fairly negotiate with providers to bring them into or keep them in their provider networks. The timing of this provision of the No Surprises Act is especially damaging to physician practices, as reductions in patient volume and revenue driven by the pandemic combine with higher practice costs to threaten their continued financial viability.

From Dr. Harmon's December 10 post

#### PSLF Program Waiver

A recent one-year waiver by the U.S. Department of Education could increase the number of physician borrowers who qualify for the maligned Public Service Loan Forgiveness Program (PSLF). The program aims to offer debt relief for physicians and others who make 120 payments on their educational loans while working for a nonprofit or government entity. Data from the Education Department shows that most applications for PSLF are denied. The waiver is designed to give those physicians and other borrowers a chance to get past payments counted toward the PSLF if they were working for qualifying employers and have Federal student loans. The waiver starts in January and runs through October 2022. (It is advisable to submit paperwork well before the October deadline.) Please note that the waiver does not affect private loans and it doesn't change qualifying employer rules. To qualify for PSLF, a physician's employer still needs to be a governmental organization, a 501(c)(3) organization, or a nonprofit organization that provides a designated public service. Click here for more details from the AMA.

#### Last Call for 2022 Health Plans

Uninsured Marylanders have until Saturday, **January 15** to sign up for health coverage. Enroll at <u>marylandhealthconnection.gov</u> or call toll-free 1-855-642-8572.

# **Medicare Updates**

# Congress Averts Medicare Rate Cuts

Congress took last minute action to halt Medicare physician payment cuts that were scheduled to take effect on January 1. Highlights of the physician payment provisions include:

- A delay in resuming the 2% Medicare sequester for three months (January 1- March 31, 2022), followed by a reduction to 1% for three months (April 1-June 30, 2022).
- A one-year increase in the Medicare Physician Fee Schedule of 3% (0.75% less than the conversion factor boost provided for 2021).
- A one-year delay in cuts to the clinical lab fee schedule.
- No 4% Medicare pay-as-you-go cut for 2022

These are welcome developments,, but more must be done to implement permanent Medicare payment reforms. <u>Click</u> <u>here</u> for more info from the AMA.

#### **2022 Medicare Rates**

CMS has released the 2022 Medicare fee schedules. Please use the <u>Novitas lookup tool</u> to download the updated amounts.

# 2022 MIPS Eligibility and Resources

The Quality Payment Program (QPP) Participation Status Tool will confirm your initial 2022 eligibility for the Merit-based Incentive Payment System (MIPS). Enter your NPI to find out whether you need to participate in 2022. To be eligible, you must:

- Bill over \$90,000 in Medicare Part B allowed charges for covered professional services per year; AND
- Furnish covered professional services to over 200 Part B beneficiaries; AND
- Provide over 200 covered professional services under Part B.

To be eligible for MIPS, a clinician or group must exceed **all 3** criteria above. However, you can opt-in to MIPS and receive a payment adjustment if you meet or exceed 1 or 2, but not all, of the low-volume criteria.

CMS has posted new 2022 MIPS resources, including the 2022 Quality Measures List, to the QPP Resource Library.

Call 1-866-288-8292 (M-F 8AM - 8PM) or email QPP@cms.hhs.gov with questions.

# Small, Underserved, and Rural Support Assistance Ending

For 5 years, CMS has provided technical assistance, known as Small, Underserved, and Rural Support (SURS), for clinicians in small practices participating in the Quality Payment Program (QPP). This initiative provides free, customized assistance to practices with 15 or fewer Merit-based Incentive Payment System (MIPS) eligible clinicians. The SURS initiative will end **February 15, 2022**. CMS will continue the following support options after that date:

- The Quality Payment Program Service Center call 1-866-288-8292 (TTY 1-877-715-6222) or email QPP@cms.hhs.gov M-F 8 am - 8 pm.
- The Support for Small Practices page has updates and resources for small practices. Bookmark <a href="https://gpp.cms.gov/resources/small-underserved-rural-practices">https://gpp.cms.gov/resources/small-underserved-rural-practices</a> for easy access.
- Webinars and trainings, including recordings, slides and transcripts of past events.
- The **QPP listserv** sends updates and upcoming deadlines. To join, enter your email address into the box at the bottom of any cms.gov webpage.

Small practices participating in QPP for 2021 should make plans to submit data early while technical assistance support is still available. The submission window opens on January 3, 2022 and closes on March 31, 2022.

# Commission to Study Mental & Behavioral Health

The Maryland Commission to Study Mental & Behavioral Health will meet virtually on Tuesday January 11 from 4 to 6 PM. The Commission welcomes testimony from the public. Those who wish to raise concerns can either participate virtually or submit written testimony to be included in the meeting materials.

- To provide oral testimony virtually during the meeting, please RSVP to <a href="mbh.commission@maryland.gov">mbh.commission@maryland.gov</a> by Friday, January 7 at 5 PM.
- To submit written testimony, please email <u>mbh.commission@maryland.gov</u> by January 12 at 5 PM. Submissions must include name, title, and organization.

If you just want to watch the livestream of the meeting, please use <u>this link</u>.

#### **MPS Members Out & About**

On November 17 **Dinah Miller, M.D.** published a commentary in MedScape, "When Should Psychiatrists Retire?"

## Expand Your MPS Engagement in 2022!

With the start of a new year, some MPS members may be looking to get more from their membership in the Maryland Psychiatric Society. Following are some of the offerings that are available and relatively easy to begin.

#### **Member Spotlight Opportunity**

Have you recently worked on an exciting research project? Reached a milestone in your career and want to share it with other MPS members? Have some good advice for younger psychiatrists who are just starting their careers? Submit a short article and photo through this <u>Google Form</u> to showcase your experiences with the MPS community.

#### Join the MPS Listserv

Join the online MPS community to quickly and easily share information with other MPS psychiatrists who participate. To join, click <a href="here">here</a>. You will need to wait for membership approval and will be notified by email. If you have any problems, please email <a href="mps@mdpsych.org">mps@mdpsych.org</a>.

#### **Curbside Conversations Resource**

Over 20 topic areas with limited participation are available! <u>Curbside Conversations</u> 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.

#### **Medical Student Mentors Needed**

The MPS is looking for members who would like to serve as mentors for MPS 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 <a href="mailto:mfloyd@mdpsych.org">mfloyd@mdpsych.org</a>.

#### **Enhance your Credentials**

Apply for Fellow or Distinguished Fellow status. Visit the <u>APA</u> website for more details and a link to the <u>application</u>.

#### **Engage with Digital Options**

To stay informed, visit the <u>MPS website</u> regularly and follow us on <u>Facebook</u>, <u>Instagram</u>, <u>Twitter</u>, and <u>LinkedIn</u>.

Other possibilities coming in March include voting in the MPS election, serving on a <u>committee</u> or joining an <u>interest group</u>. Watch your email for details.



# **CLASSIFIEDS**

#### **POSITIONS AVAILABLE**

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

**Psychiatrist – Remote Available:** Carroll Counseling realizes the strength of our practice is our exceptional staff. Our professional and innovative culture supports our clinicians in building a thriving and profitable caseload. We are currently seeking an exceptional Psychiatrist and offer the option of telehealth, onsite or a hybrid model. Strong compensation salaried or uncapped reimbursement options, Excellent comprehensive benefits, Sign-on bonus, Highly Flexible Scheduling, Longevity bonuses, Professional Development/CME. Carroll Counseling Center is a multi-disciplinary group providing psychotherapy and psychopharmacology services for children, adults and families throughout the greater Baltimore and Frederick, Maryland area. Carroll Counseling is a proud member of the Refresh Mental Health network - a nationwide network that includes leading, private practices with unique and specialized programs. This relationship enhances our practice with additional resources while allowing us to maintain our local leadership and solid reputation in the community – as well as allowing you to focus on what you do best - providing exemplary care! For consideration or additional information contact Rachel Klockow, Refresh Mental Health, rklockow@refreshmentalhealth.com (954) 801-5594.

#### OFFICE SPACE AVAILABLE

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 <a href="mailto:keithmillercounseling.com">keith@keithmillercounseling.com</a>.

Ellicott City: Daily/Part-time/Full-time: Following CDC guidelines, Telehealth and in person. Includes Wi-Fi, copier, fax, staff kitchen, handicapped access. Convenient to route #'s: 40, 29, 32, 70 & 695. Contact Dr. Mike Boyle 410-206-6070 or 410-465-2500.

Lutherville – Beautiful part time office in first floor suite at Joppa Green adjacent to Hopkins at Greenspring Station. Separate exit, spacious waiting room, fax, copier and Wi-Fi with other independent mental health professionals. Ideal for either virtual or in person visits. Contact Stuart Varon, MD 410-583-1859 #2 or Svaronmdllc@aol.com.

# Rewarding Opportunities for Psychiatrists Across Maryland

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

**CURRENT OPENINGS INCLUDE:** 

**Addictions Medical Director** 

Residential: Service Chief of a new Adolescent

**Residential Program** 

Inpatient Unit Chief: Trauma Disorders

**Outpatient Staff Psychiatrists: Eating Disorders** 

**Outpatient & RTC: Medical Director & Psychiatrists** 

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*.



