

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 September 12 at 7:30 PM. All members welcome!

President's Column

Acceptance and Change at MPS

The last Council meeting will be remembered as one of important votes for significant upcoming changes.

One change has to do with personnel. MPS Executive Director Heidi Bunes, who has been on staff since 1989, has announced she wishes to retire. Heidi has dedicated decades to the organization, which she supports through her work in many committees, including the Council and Executive Committee, and Distinguished Fellowship, Community Psychiatry & Diversity, and Ethics committees. In addition to her work on the committees, she edits this newsletter, staffs the Maryland Foundation for Psychiatry, and manages the finances of MPS, MPPAC and MFP. She also has historical knowledge of the organization and has worked with many officers changing on a yearly basis; transitions that anyone would find challenging, but she has managed with ease. She is methodical and detailed-oriented. And most important, she always communicates with a big smile, making everyone feel comfortable, while fearlessly guarding the interest of psychiatrists in Maryland with eyes wide-open eyes for any legislative or institutional changes. Without question, Heidi deserves a break from work and more time with her family, and she also will be sorely missed.

Meagan Floyd, our current Associate Director, has agreed to step up as Executive Director once Heidi steps back from her role. Meagan is also very knowledgeable about MPS. She started her work in the organization in 2002 as Membership and CME Coordinator. She currently coordinates and designs MPS publications, processes MPS membership and plans CME events. She also staffs the MPPAC, the Editorial Advisory

Board and the Academic Psychiatry, Legislative, Membership, and Program and CME committees. Meagan has the energy and the will to be an excellent, efficient leader. She is highly prepared and will be successful in continuing to support MPS. We are excited she is willing to lead and congratulate her on this new position.

With these changes, there will be a need to hire a new staff member. The plan is for Heidi to transition to part-time Associate Director for a period of time that will depend on MPS needs and the hiring and training of an entry level full-time employee with career advancement.

The second change has to do with MPS's office space. The Council has agreed to sell our office in St. Paul and move back to the MedChi building, slightly west in Baltimore, on Cathedral Street. The St. Paul's office was purchased in June of 1988. At the time, MPS had an office at a building on Maryland Avenue owned by MedChi and needed a bigger space. Up until the pandemic, the office hosted regular in-person meetings, including Executive Committee, Council, and committee meetings. I personally remember Council and Diversity Committee meetings held late in the evening when Dr. Ann Hackman would bring fresh brownies that brought warm memories of my residency didactics days. I know I am not the only one.

However, since the COVID-19 pandemic, staff have mostly worked remotely, and there have been no in-person committee or Council meetings held at the office since February 2020. There are no upcoming plans for in-person meetings as we have found that attendance is easier on everyone's schedules when transportation time does not need to be factored in. While the office is not being fully

utilized, monthly expenses continue and there has been no value appreciation. The Executive Committee explored the option of transitioning the office into a residential rental but the cost associated with upgrading the space, paying a management company, and maintaining recurring costs would not make it a good financial option as the monthly rent would be almost equal to expenses.

It is rare for APA District Branches to own an office space. The MPS Executive Committee also discussed selling the MPS office and renting a smaller office space at the MedChi building to serve as a hybrid workspace (each staff member would use it 1-2 days a week and work remotely the rest of the time). The building has conference rooms that could be utilized at no cost and the MPS would save \$18-20K of annual office costs. Meagan has worked hard to establish a relationship with MedChi and secure a great space for MPS that we cannot wait to share with the membership.

The Council approved these staff and office changes at our June meeting and set in motion a transfer of staff roles and space transition.

This is a time of organizational change. MPS members will need to uncouple the organization's identity from our decades-long owned MPS office and adapt to the changes driven by the pandemic. While we let go of this space, we also have new opportunities to look forward to, with a potential closer collaboration with our colleagues in MedChi, the Maryland State Medical Association, and other medical specialty organizations facilitated by the new office space.

As for the staff, these simple words may be best to encompass everyone's feelings: congratulations and welcome to Meagan, and thank you to Heidi for your hard work, flexibility, willingness to problem-solve, and loyalty to MPS. Our best wishes to Meagan and Heidi!

Carol Vidal, M.D., Ph.D.

Attention Graduating Residents

Congratulations! As you move on from your residency training program, please complete the APA [membership advancement form](#). This lets us know if you are continuing in a fellowship or advancing to practice. As a General Member, you can access additional benefits, including [resources](#) for early career psychiatrists. Your MPS dues will remain the same! The [form](#) takes less than 5 minutes to complete.

SAMHSA Advisory on Long COVID

A new SAMHSA advisory [Identification and Management of Mental Health Symptoms and Conditions Associated with Long COVID](#) discusses epidemiology and provides evidence-based resources for the treatment of those conditions.

Resident-Fellow Members' Post Residency Plans

James Aluri, M.D. : Dr. Aluri will continue as the Adolf Meyer Fellow at Johns Hopkins.

Alyssa Beda, D.O. : Dr. Beda will start at Villa Maria Behavioral Health Clinic at Lansdowne with Catholic Charities, as well as their clinic in Cumberland, MD. She will provide care for children, adolescents, adults, and addiction services.

Robert J. Berg, M.D.: Dr. Berg will continue his training as a child fellow at Johns Hopkins Hospital.

Shannon M. Bush, M.D. : Dr. Bush will be attending at Lifespan Physicians Group-Brown University doing Women's Behavioral Health as well as Sex and Gender Psychiatry.

Karen M. Dionesotes, M.D., MPH : Dr. Dionesotes will begin a 1-year geriatric psychiatry fellowship at Johns Hopkins.

Candice Espinoza, M.D.: Dr. Espinoza will continue her training as a child fellow at Brown.

Evelyn Gurule, M.D., Ph.D. : Dr. Gurule will work as an assistant professor at Johns Hopkins Hospital.

Tuna Hasoglu, M.D. : Dr. Hasoglu will work at Tufts Medical Center in July. He will provide psychiatric care for geriatric patients.

Stephanie S. Kulaga, M.D. : Dr. Kulaga will continue training at the Maryland Psychiatric Research Center in a 2-year post-doctoral T32 research fellowship studying psychosis.

Melissa J. Lavoie, M.D. : Dr. Lavoie will start a forensic psychiatry fellowship at Yale in July.

Zoe I. Luscher, M.D.: Dr. Lucher will work as an outpatient psychiatrist (community mental health and student mental health) at Montefiore/Einstein in the Bronx, NY.

Kelly T. Pham, M.D. : Dr. Pham will continue training at University of Maryland, doing a consultation-liaison fellowship.

Puja Sheth, M.D. : Dr. Sheth will continue training at UCSF in San Francisco, CA, doing a fellowship in C/L psychiatry.

Elizabeth Steuber, M.D. : Dr. Steuber will pursue child psychiatry training at Harvard's Boston Children's Hospital.

Anna Zeira, M.D., MPH : Dr. Zeira will be doing 1 year fellowship at Columbia in Public Psychiatry.

We hope to hear about other members' post-residency plans and will include them in a future issue. Please send updates to mfloyd@mdpsych.org.

June13 Council Highlights

Support for MPS Strategic Priorities

Dr. Vidal reported recent actions aimed at MPS [strategic priorities](#), including outreach to newly dropped members, email about legislative victories to non-members, a new CD account with higher interest, and vendor contacts regarding opportunities to connect with MPS members.

Executive Committee Report

Dr. Vidal said that MPS and Washington Psychiatric Society representatives will meet August 1 to review the MOU. She reported on the well-attended, financially successful April 20 in-person MPS annual meeting and dinner. She noted that Dr. Samuel Williams is officially appointed to the Workgroup on Black, Latino, Asian American Pacific Islander, and Other Underrepresented Behavioral Health Professionals. Regarding advocacy, MPS signed on to a [funding request](#) for gun violence prevention research and sent a letter to the MD Attorney General regarding the current stimulant medication shortage.

Secretary-Treasurer's Report - The 3/31/2023 Financial Statements were postponed from the April 4 Council meeting. Dr. Balis gave highlights of the first quarter:

- Total assets are \$444K, down \$15K from this time last year. MPS has \$4K more cash; higher membership dues receivable reflect more members choosing a payment plan for 2023. Liabilities of \$183K are down \$2K; while deferred membership dues are up \$11K, prepaid fees are down because of less package offer sales. Net assets of \$262K are down \$13K.
- Compared to budget to date, membership dues are \$4K under (the 7.95% dues increase is offset by members dropped for non-payment). Ad, meeting, and package offer income are under budget. Total income of \$76K is \$7K under budget. Expenses are \$2K under budget overall with a total of \$83K. The \$7K loss is \$4K worse than budget.
- Compared to last year at this time, total Income is up \$4K. Dues are the same despite the increase and valiant retention efforts. Miscellaneous income is \$4K higher reflecting vendor support for the February RFM trivia night. Total expenses are up \$5K, because of \$3K for the project to code all Maryland addresses for legislative and congressional districts, and \$3K more miscellaneous expense for trivia night. The \$7K loss is slightly worse than the loss at this time last year.
- There is a net increase in cash of \$11K for the quarter since January 1.

APA Assembly Representatives' Report – Please see p.8 of the [June issue](#) for the complete report.

New Business

Dr. Merkel-Keller presented the slate of FY24 Maryland Foundation for Psychiatry Officers and Directors, which Council voted to approve with Dr. Balis abstaining. [[See p.7 for details.](#)]

She then referred to the information sent to Council before the meeting regarding the MPS staff transition and the proposed transition from a condo office to a hybrid office. First, she announced that Ms. Bunes had shared her plans to retire. Dr. Merkel-Keller expressed gratitude for her many years of helping the organization run smoothly, and for her willingness to assist with the transition. Ms. Bunes conveyed her appreciation for the excellent leaders she has worked with and the many successes that have been achieved. Dr. Merkel-Keller explained that the Executive Committee had considered various configurations for staff going forward.

To provide more support and minimize disruption, the Executive Committee recommended that Meagan Floyd be promoted to Executive Director and that staff expand to include a part time employee for a year or two, depending on MPS needs. Ms. Bunes would work part time to assist with the transition. A new entry-level full-time employee with potential to grow would be hired. The 2023 salaries budget would be reallocated plus possibly \$40K would be needed. After a year or so, Ms. Bunes would retire completely, and staff would return to 2 FTE. Council voted unanimously to approve the recommended staff configuration for the transition.

Then Dr. Merkel-Keller revisited the topic of moving from a condo office to a hybrid office that was first considered in September 2021. Purchased in 1988, 1101 St. Paul, Suite 305 has served as the MPS office and, until the pandemic, hosted many regularly occurring in-person meetings and MPS staff who worked in person 5 days a week. Since COVID, staff have transitioned to working remotely and go to the office 1-2 days per week. There have been no in-person meetings at the office since February 2020 and there is no plan for them to return. The office is not being fully utilized, although monthly expenses continue.

A smaller space is available at MedChi, with access to meeting rooms and office equipment. This hybrid option would save about \$1500/month, although upfront expenses associated with moving and downsizing would temporarily increase costs. Synergies with lobbying efforts and CME programming might also be achieved.

Renovating the office for a residential rental is not a viable option. Given that the office has not appreciated significantly, property values in the area are not rising, and the real estate tax assessment is currently overestimated, and in keeping with stewardship of limited MPS resources, the MPS Executive Committee recommended selling the MPS office and renting a smaller office space at MedChi. The MPS could earn interest on the proceeds and trim about \$18K/year of expenses. After questions and discussion, Council voted unanimously to move the MPS office to MedChi and sell the condo.

Maryland News

PDL Updates Effective July 1

The Office of Pharmacy Services [Advisory 248](#) alerts prescribers to changes in the Maryland Medicaid Pharmacy Program Preferred Drug List (PDL) effective this month, including anti-convulsants, antidepressants, opioid use disorder treatments, and stimulants. Please refer to the [website](#) for the current PDL and Brand Preferred over Generics List.

New ICD-10 Diagnosis Codes Added

Effective June 1, MDH has approved 24 new ICD-10 diagnosis codes that have been added to the [Mental Health Diagnosis](#) list and the [Poisoning Diagnosis](#) list. Please see the [Provider Alert](#) for a list of the new codes.

New Fee Schedule Effective July 1

A [June 15 Optum Provider Alert](#) has links to documents listing new rates based on 3% increases in certain Medicaid behavioral health provider rates effective July 1. E&M codes are excluded from this legislative increase.

Crisis System Transition for DDA Enrollees

Crisis System providers were notified that because the Developmental Disabilities Administration's (DDA) crisis response system for individuals with intellectual and/or developmental disabilities (I/DD) is duplicative of the BHA Crisis System, and the behavioral health system is already receiving and managing those calls, these services will be transitioned to BHA **beginning July 1**. Crisis System information was shared with DDA stakeholders who will now call 988 for crisis support. Click [here](#) for the full transmittal from MDH.

Legal Adult Use Cannabis Effective July 1

Effective July 1, adults 21+ can purchase cannabis from licensed dispensaries. [Click here](#) for the Maryland Cannabis Administration's FAQs. The [website](#) has more information, including medical cannabis, data and reports.

New Laws Effective July 1

[HB 186: Victim Services Programs – Supplementing Federal Funding and Support \(Victim Services Stabilization Act\):](#)

Providing for the stable funding and support of trauma-informed, high-quality programs and services for victims of crime; requiring the Governor's Office of Crime Prevention, Youth, and Victim Services to help support certain programs providing services for victims of crime; requiring the Office to consult with certain individuals and organizations regarding the allocation of certain funding; and requiring the Governor to include certain funding in the State budget.

[SB 168: Maryland Developmental Disabilities Council - Establishment:](#) Establishing the Maryland Developmental Disabilities Council as an independent unit of State government with the authority to conduct and support advocacy, systems change, and capacity-building efforts to promote inclusive communities and equity in services for individuals with disabilities in the State, research best practices and provide related training and technical assistance to communities in the State, and inform State and local leaders about disability issues.

[SB 362: Certified Community Behavioral Health Clinics - Planning Grant Funds and Demonstration Application:](#) Requiring the MDH to apply to the Substance Abuse and Mental Health Services Administration at the Center for Mental Health Services for federal planning, development, and implementation grant funds related to certified community behavioral health clinics for fiscal year 2025; and requiring the Department to apply to the Administration for inclusion in the state certified community behavioral health clinic demonstration program for fiscal year 2026.

[SB 283/HB 418: Behavioral Health Workforce Investment Fund:](#) Establishing the Behavioral Health Workforce Investment Fund to provide reimbursement for costs associated with educating, training, certifying, recruiting, placing, and retaining behavioral health professionals and paraprofessionals; providing that money expended from the Fund is supplemental to and not intended to supplant other funding; and requiring the MHCC, in coordination with certain other agencies, to conduct a comprehensive behavioral health workforce needs assessment by October 1, 2024.

[SB 3/HB 271: 988 Funding:](#) Requiring the Governor to include in the annual budget bill for fiscal year 2025 an appropriation of \$12,000,000 to the 9-8-8 Trust Fund.

[SB 154: Mental Health Advance Directive Awareness:](#) Requiring the MDH to develop and implement a public awareness campaign to encourage the use of mental health advance directives in the State; and requiring the BHA and the MHCC jointly to study how first responders and behavioral health crisis providers can access a certain advanced directive database when responding to a behavioral health crisis.

Maryland News

Maryland Board of Physicians News

The Maryland Board of Physicians (MBP) [Spring newsletter](#) has several updates of interest:

Licenses for physicians with last name starting with **M-Z** will expire on September 30, 2023.

CME Reporting

The MBP and ACCME offer a new, automated CME reporting system. Licensees can request the educational provider to report their CME credits to ACCME's Program and Activity Report Systems (PARS), which the MBP can access. Licensees must provide their information for the educational provider to verify and share their participation. [Click here](#) for details.

Expedited Physician Licensing Pathways

Licensure by Endorsement - MBP accepts licensure from another state as sufficient evidence that the applicant has met some or all of the requirements for licensure in Maryland. Licensure by Reciprocity - MBP accepts medical licenses from Virginia and D.C. as sufficient evidence that the applicant has met Maryland licensure requirements. [Click here](#) for more details.

New Licenses

Effective July 1, 2023, all physician applicants must use the Uniformed Application (UA) for Licensure and the Federation Credentials Verification Service (FCVS). The UA is a single application for licensure in multiple states, improving license portability. The FCVS is a convenient way to store credentials used for multiple state medical boards.

Retired Physicians Inactive and Emeritus Status

A bill enacted this year authorizes MBP to issue an emeritus license status for retired physicians. **Beginning October 1, 2023**, retired physicians with at least ten years of service in Maryland may apply. To be eligible, they cannot have been subject to disciplinary action that has resulted in revocation or suspension at any time in any jurisdiction in which they have been licensed, nor can they be under investigation by MBP. Emeritus physicians may not practice medicine or prescribe in Maryland but may retain their professional title and are exempt from renewal and CME requirements. Emeritus status will be reflected on the physician's practitioner profile.

License Exemption for Military Service

Effective January 1, 2023, federal legislation exempts military service persons and their spouses from the licensing process if they have an active license in a U.S. state, their license is in good standing, and they or their spouse have military orders to provide military service in Maryland. The exemption is valid only during the orders.

Medicaid Crisis Services Implementation Update

MDH postponed the scheduled July 1 effective date for licensing and Medicaid reimbursement for mobile crisis team services and behavioral health crisis stabilization center services. To address and incorporate many of the requested changes in public comments responding to the proposed mobile crisis team services and behavioral health crisis stabilization center services regulations, Medicaid (10.09.16) and BHA (10.63.01.02, 10.63.01.05, 10.63.02.02, 10.63.03.20 and 10.63.03.21), the proposed regulations are being updated and will be repropose in the coming months. MDH has not yet determined the new implementation date.

Medicaid Redetermination Toolkit

Resources are available for providers from Maryland's Medicaid Check-In Campaign to help avoid disruptions in health insurance coverage following the pandemic. A [Redetermination Provider Toolkit](#) includes flyers, social media instructions, newsletter blurbs, email, text message and Check-In logo. These resources are available in multiple languages.

Enrollees will receive a notice from Medicaid about their coverage with instructions to complete their renewal. If an individual is no longer eligible for Medicaid coverage, they may be eligible to enroll in another low-cost option. Individuals have up to 60 days after Medicaid coverage ends to enroll in a new plan on [Maryland Health Connection](#). If enrollees fail to respond, their Medicaid coverage will end. More information is available [here](#).

MDH [reported](#) that Maryland Medicaid processed 119,803 renewals in May, of which 10,032 were determined to be not eligible based on information provided and were disenrolled, and 24,643 were disenrolled for procedural reasons, such as not updating eligibility information. The [Medicaid Check-In campaign](#) encourages eligible Marylanders to maintain coverage.

Moms With Opioid Use Disorder

The MOM Program provides case management services to pregnant Medicaid enrollees with opioid use disorder to support a healthy pregnancy and improve care for one year following. Please refer potential participants, provide access to critical health services, and link participants with community resources to ensure access to care. For more information and enrollment, visit the [website](#).

Maryland News

Carriers Propose ACA Premiums for 2024

The MIA [announced](#) it has received filings with [proposed 2024 premium rates](#) for Affordable Care Act (ACA) products offered by health and dental carriers in the Individual, Non-Medigap and Small Group markets, which impact approximately 471,000 Marylanders. Commissioner Birrane will hold a public [hearing](#) on the proposed rates on July 19 and expects to issue decisions in September 2023. Although [plans vary](#) significantly, the overall average increases are lower than last year, driven primarily by 2022 claims coming in lower than anticipated and a lower projected claims trend. [Click here](#) for details, including how to submit testimony by the **July 13** deadline.

\$.5M MIA Fine for Parity Violation

The Maryland Insurance Administration (MIA) issued an order in June that penalizes UnitedHealthcare \$500,000 for failing to meet the requirements of [SB 334/HB 455](#), priority legislation from 2020 that established parity compliance reporting requirements for commercial health insurers in Maryland. This follows the order MIA issued in March penalizing Care-First \$250,000 for violating the same statute. Please [click here](#) for more information.

Health Claim Denials

The [MIA website](#) has a two-part video series (also available on Apple podcast) on how to handle Health Claim Denials:

Part 1 - Medical Necessity & Emergency Appeals Hotline: Call **1-800-492-6116** for immediate help with insurance concerns involving physical care and mental health and substance use disorder care 24/7, 365 days a year.

Part 2 – Filing an appeal: The Maryland Attorney General's Health Education and Advocacy Unit will assist free-of-charge with filing appeals. Call toll-free at **1-877-261-8807**.

MIA on Alert on MOVEit Data Breach

The Maryland Insurance Administration (MIA) [alerted](#) consumers that several insurance companies reported that the personal information of some Maryland consumers was exposed during data breaches of certain MOVEit cloud-hosting and file transfer services. The information exposed may include Social Security numbers, birthdates and other sensitive identifying information. As of this date, MIA has only received notices from insurers that issue life, annuity, and long-term care products.

High Acuity Tertiary Care Inpatient Program

The Maryland Department of Health (MDH) reissued its Request for Expressions of Interest in providing enhanced patient care services to individuals in behavioral health crises experiencing extended hospital stays. The major challenge to placement for the tertiary care population has been the ability of providers to meet the diagnostic, therapeutic treatment, staffing, length of stay, and patient environment of care requirements within the current reimbursement for services model. Grant funding would support the enhanced services for 25 tertiary care beds. **July 19** is the deadline to respond. [Click here](#) for details.

Collaboration Expands Support for LGBTQ+ Youth

MDH [announced](#) a collaboration with The Trevor Project, a leading suicide prevention organization for LGBTQ+ young people. The Caring Out Loud campaign will bring trainings, resources and support to LGBTQ+ Marylanders. It will include LGBTQ+ focused training for the department's Behavioral Health Administration staff, members of the Governor's Commission for Suicide Prevention, and healthcare professionals in 24 Maryland jurisdictions. The Trevor Project's most recent U.S. National Survey found that [41% of LGBTQ+ young people](#) seriously considered attempting suicide in the past year, including half of transgender and nonbinary young people. [Click here](#) for the survey results for Maryland.

Funding for Youth Suicide Prevention

SAMHSA [announced](#) awards totaling \$5.9 million to states, tribes and college campuses for youth suicide prevention programs. University of Maryland College Park and Goucher College were among the grant recipients.

July 20 MPHP CME Lecture

Former MedChi President Brooke Buckley, M.D. will give a virtual presentation, ***Leading in a Burned-Out World***, on Thursday, **July 20 at 6:30 PM** as part of Maryland Physician Health Program's 45th Anniversary Lecture Series. [Click here](#) for more details about this free CME program.

Advertise with MPS!

Please help MPS generate non-dues income by placing MPS ads to connect with psychiatrists. [Click here](#) for ad rates.

Maryland News

July 8 Community Mental Health Fair

Join the APA and Morgan State University's School of Community Health & Policy for the **APA MOORE Equity in Mental Health Community Fair on Saturday, July 8th** from 10am - 2pm on Morgan State University's Campus in front of the Earl Graves Business School (4100 Hillen Road, Baltimore MD, 21218).

Community members in Baltimore will be connected to local mental health information and resources, organizations, and have a day of family friendly fun with free food, music, prizes, and workshops! Arrive early and hear from special guest, Jay Barnett, former NFL football player turned author, therapist, and motivational speaker, Regina James, MD, Chief, Diversity and Health Equity and Deputy Medical Director, APA, and Maryland State Senator Ariana Kelly.

Registration is free on [EventBrite](#). Contact moore@psych.org with any questions or to get involved.

This event is part of [APA's MOORE Equity in Mental Health Initiative](#) which honors the legacy of Bebe Moore Campbell during Bebe Moore Campbell National Minority Mental Health Awareness Month.

Drug Affordability Board Update

Maryland Matters [reported](#) on Maryland Prescription Drug Affordability Board steps to establish regulations that determine which drugs will have price limits. Establishing an "upper payment limit" that state and local government health plans pay for providing those drugs to their employees could bring down costs for all Marylanders. Factors that may be considered include costs of administering the drug, delivering it to consumers, and other administrative costs. The final version of the rules is expected to be voted on at the [July board meeting](#). [Click here](#) for more details.

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](#). The programs run from **5 to 6 PM**:

July 13: No webinar

2023-2024 MFP Officers and Directors

The Maryland Foundation for Psychiatry (MFP) Officers and Directors for the coming year were approved by MPS Council on June 13.

PRESIDENT: Neil E. Warres, M.D.

VICE PRESIDENT: Arthur M. Hildreth, M.D.

SECRETARY-TREASURER: Thomas E. Allen, M.D.

BOARD OF DIRECTORS:

Mrs. Carol Allen
Theodora G. Balis, M.D.
Joanna D. Brandt, M.D.
Mandar P. Jadhav, M.D.
Mark S. Komrad M.D.
Paul S. Nestadt, M.D.
Chinenye Onyemaechi, M.D.
Elias K. Shaya, M.D.
Jonathan J. Shepherd, M.D.
Crystal C. Watkins, M.D., Ph.D.
Edgar K. Wiggins, M.H.S.

HONORARY DIRECTORS:

Robert P. Roca, M.D.
William C. Wimmer, M.D.

Learn more about MFP at the [website](#).

Williams Appointed to Workgroup on Underrepresented Clinicians

Secretary Laura Herrera Scott, M.D., M.P.H. has appointed **Samuel L. Williams III, M.D.** to the Maryland Department of Health's [Workgroup for Underrepresented Black, Latino, Asian American Pacific Islander, and other Underrepresented Behavioral Health Professionals](#). The Workgroup will 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 professions and make recommendations on how to increase their number.

A May 18, 2023 Commonwealth Fund [explainer](#) notes that the scarcity of behavioral health professionals is a challenge for everyone, but underserved groups like people of color, non-English speakers, and LGBTQ communities are disproportionately impacted. As with many other health care specialties, the demographics of the workforce often do not reflect the people they serve, and the mismatch can limit access to culturally and linguistically appropriate care.

Maryland News

New Maryland Behavioral Health Initiatives

Two bills from the 2023 legislative session that establish a state role in behavioral health took effect last month.

SB582/HB1148: Behavioral Health Care - Treatment and Access (Behavioral Health Model for Maryland) is multi-faceted. This bill (1) establishes a Commission on Behavioral Health Care Treatment and Access; (2) creates a Behavioral Health Care Coordination Value-Based Purchasing Pilot Program; (3) extends for two years provisions relating to telehealth services; (4) requires the Maryland Health Care Commission to study and make recommendations regarding telehealth; and (5) requires the Maryland Department of Health to apply for federal grants and inclusion in the state certified community behavioral health clinic demonstration program. For fiscal 2025 through 2027, the Governor must include in the annual budget bill an appropriation of \$600,000 for the pilot program. Among other duties, the Commission must assess behavioral health services in the State to identify needs and gaps in services across the continuum and report to the Governor and General Assembly by January 1, 2024. The Governor's appointments office is filling the 38 seats on the Commission. MPS plans to join meetings and participate in the workgroups.

Other legislation extends by one year the reporting and termination dates for the **HB615: Workgroup on Black, Latino, Asian American Pacific Islander, and Other Underrepresented Behavioral Health Professionals**. Findings and recommendations must be reported to the Governor and the General Assembly by July 1, 2024. The workgroup terminates June 30, 2025. MPS member **Samuel Williams, III, M.D., M.B.A.** has been appointed to the Workgroup.

Member Spotlight

Congratulations Dr. Dionesotes!

Recent Johns Hopkins psychiatry residency graduate and new geriatric psychiatry fellow **Karen Dionesotes, MD, MPH** had a major role in an AMA Innovation Academy collaboration that resulted in a [webinar](#) and [practice guide](#). These resources are also available at other locations on the AMA site and on the Behavioral Health Integration Collaborative's [YouTube playlist](#). She shared, "It was really fun being able to identify this gap and then go on to create the resources and have these finished products."

Special Member Rate for MPS Directory Ad

MPS members can advertise their practice, new office location, specialty, new book, etc. for a special members-only rate of \$100 for 1/3 page in the directory. The 2023-2024 directory will be out in fall 2023, so order soon!

For details, email Meagan at mfloyd@mdpsych.org.

Are you a General Member? Become an APA Fellow!

Are you ready to take the next step in your career? Fellows of the APA (FAPA) are part of a select group dedicated to shaping the role of psychiatry in our healthcare system. Fellow status is an honor that enhances professional credentials and reflects dedication to the psychiatric profession. Dues rates stay the same. **The deadline is September 1.** Visit the [APA website](#) for more details and instructions for how to apply.

Member Update Forms

Your member update form was sent in May via USPS, along with your Annual Survey. The MPS membership directory will be published in late Summer. Please ensure that your information on file with MPS is up to date. If you opt in, this data is also used for the online Find a Psychiatrist and the telephone patient referral service. Please indicate all insurance plans where you participate in-network. You can also log in to your member account on the MPS website to directly enter updates. **The deadline for directory changes is August 10th.**

2023 MPS Member Survey

The annual MPS member check in on a variety of topics has been sent via email and USPS. Please respond to help guide how MPS committees, Council and staff will work for you in the coming year.

INCENTIVE: Three respondents who complete the entire survey and provide their names will be chosen at random for a **\$100 credit** that can be applied toward MPS dues or an MPS event.

[CLICK HERE](#) to start – this should take less than 5 minutes!

APA News & Information

APA Roundtable Conversation on Mental Health Equity

Join the APA on Wednesday, **July 5th from 4 - 6:30 PM** at its [DC Headquarters](#) to kick off Bebe Moore Campbell National Minority Mental Health Awareness Month with an Equity in Mental Health Roundtable Conversation, *The Mental Health Impact of Severe Maternal Morbidity and Mortality on Families*. Panelists include California Surgeon General Diana Ramos, MD, MPH, MBA, FACOG, Dionne Hart, MD, and Regina James, MD.

The current U.S. maternal health crisis disproportionately impacts non-Hispanic Black and Indigenous people, who are three to four times more likely to experience birth-related deaths and Severe Maternal Morbidity (SMM). The roundtable will examine the impact of maternal deaths on surviving family members and the unmet mental health needs of those who experience SMM. Panelists will explore strategies to address maternal mental health care access disparities and discuss ways front-line reproductive health providers can facilitate mental health services referrals to better support families.

In-person attendance is available on a first come, first-served basis. Hors d'oeuvres and beverages from 4 – 5 PM, with the program beginning at 5 PM. Please RSVP to MOORE@psych.org. [Click here](#) to join virtually for the 5 PM livestream Zoom webinar.

Enforcement of HIPAA Telehealth Requirements

After exercising and temporarily extending [enforcement discretion](#) allowing the use of non-HIPAA-compliant communications technology for telehealth throughout the pandemic, **HHS will resume enforcement on August 9**. The [April 11, 2023 HHS announcement](#) included a 90-calendar day transition period for covered health care providers to come into compliance with the HIPAA Rules with respect to their provision of telehealth.

The APA Division of Policy, Programs, and Partnerships will host an APA member Lunch and Learn in the [Policy & Practice Insights Series](#):

HIPAA Compliance for Telehealth

July 12 from 12-12:30 PM

[Register Here](#)

Please contact apatelepsychiatry@psych.org if you have any questions.

Abby Worthen
APA Deputy Director for Digital Health

July 28 Learning Immersive on Addictions

APA President Petros Levounis, M.D., M.A. and leading experts Smita Das, M.D., Ph.D., M.P.H., and Carla Marienfeld, M.D. will hold a one-day learning immersive on addictions at APA headquarters in DC. A welcome reception will precede on **Thursday evening, July 27**, followed by the event on **Friday, July 28** addressing the neurobiology of addictions along with an overview of tobacco, alcohol, and opioid use disorders and the psychopharmacological and psychosocial interventions for substance use disorders. [Click for details](#).

July 29 Run, Walk & Roll 5K in Maryland

[The MOORE Equity 5K returns on July 29th](#) Join the APA and the American Psychiatric Association Foundation (APAF) for the 3rd Annual Moore Equity 5K benefitting APAF's [Moore Equity in Mental Health Community Grants Initiative](#), which was established in 2021. The initiative supports individuals and community organizations that have undertaken innovative awareness programs and/or have provided services to improve the mental health of young people of color. Run, Walk or Roll in-person at Wheaton Park in Glenmont, MD or take part virtually in your home community. [Ready. Set. GO!](#)

APA Advocates for Maintaining 2024 Medicare Rates for Telehealth

On June 8, the APA sent a [letter](#) to CMS sharing the results of APA's 2023 Telepsychiatry Survey. The survey provided key data that underscore the importance of maintaining reimbursement for telehealth at equivalent rates to in-person care in the Medicare Physician Fee Schedule. Among other insights, survey results indicated that 85% of psychiatrists maintain at least one physical practice location, thus offering hybrid care, and 82% of telepsychiatry is delivered via audio/video technology.

APA Requests FDA Meeting on Stimulant Shortages

APA and the American Academy of Child and Adolescent Psychiatry (AACAP) sent a [letter](#) to the Food and Drug Administration (FDA) Commissioner requesting a meeting to discuss the stimulant shortage that is continuing to impact patient care across the country. The disruption in the supply chain has deeply impacted APA and AACAP members, their patients, and the families of patients our members treat. It has also caused a tremendous burden on psychiatrists and pharmacies to fill prescriptions.

APA News & Information

2023 APA Mental Health Services Conference

In Washington, D.C. from **Thursday, October 12** through **Saturday, October 14**, the Mental Health Services Conference will bring together the whole team caring for those with mental illness, including psychiatrists, nurse practitioners, primary care physicians, social workers, and more, to collaborate on practical advice to influence systems-level change for their patients. [Click here for details.](#)

Congratulations!

Congrats to **Drs. James Aluri, Karen Dionesotes, Anita Everett, Zoe Luscher, Sandeep Nayak, and Paul Nestadt** who were among the Johns Hopkins-affiliated MPS members who gave talks at the recent APA annual meeting.

Submit Abstracts for 2024 APA Annual Meeting

Abstract submissions are being accepted for the 2024 APA Annual Meeting, May 4 to 8 in New York City. The theme is "Confronting Addiction: From Prevention to Treatment." Submit ideas **by September 7** for general sessions, courses, and posters to the biggest psychiatric meeting of the year. [Click for details.](#)

Nominations Open for APA Components

Involvement of members on councils and committees (known as components) enables the APA to accomplish important work to benefit patients with mental illness and advocate for the profession's interests. One-third of the positions on APA's councils and committees are open for appointment each year. [Click here](#) to learn more about APA leadership opportunities and nominate yourself or a colleague by Tuesday, **August 15** for component service.

FREE APA Course of the Month

Each month, APA members have free access to an on-demand CME course on a popular topic. [Click here to access the Course of the Month and sign up for updates about this free member benefit.](#)

New Consumer Information for No Surprises Act

The [No Surprises Act website](#) explains provisions that protect people covered under group and individual health plans from receiving surprise medical bills when they receive most emergency services, non-emergency services from out-of-network providers at in-network facilities, and services from out-of-network air ambulance service providers. The Act also establishes a dispute resolution process for plans and providers, and provides new dispute resolution opportunities for uninsured and self-pay individuals when they receive a medical bill that is substantially greater than the good faith estimate they get from the provider. [Click here](#) to access the APA's recommendations for how to implement its provisions in a psychiatric practice.

Award Nominations Invited

The APA recognizes psychiatrists and mental health advocates who have made exceptional contributions to psychiatry and mental health in a range of categories. Following are awards with upcoming deadlines:

- [Frank J. Menolascino Award](#) (July 10)
- [Bruno Lima Award for Excellence in Disaster Psychiatry](#) (July 31)
- [Psychiatric Services Achievement Awards](#) (July 31)
- [Frank J. Menolascino Award](#) (August 1)
- [Agnes Purcell McGavin Award for Distinguished Career Achievement in Child and Adolescent Psychiatry](#) (August 15)
- [Agnes Purcell McGavin Award for Prevention](#) (August 15)
- [Alexandra Symonds Award](#) (August 15)
- [Chester M. Pierce Human Rights Award](#) (August 15)
- [George Tarjan Award](#) (August 15)
- [Hartford-Jeste Award for Future Leaders in Geriatric Psychiatry](#) (August 15)
- [Jack Weinberg Memorial Award in Geriatric Psychiatry](#) (August 15)
- [Jeanne Spurlock, M.D. Minority Fellowship Achievement Award](#) (August 15)
- [John Fryer Award](#) (August 15)
- [Kun-Po Soo Award](#) (August 15)
- [Oskar Pfister Award](#) (August 15)
- [Simon Bolivar Award](#) (August 15)
- [Solomon Carter Fuller Award](#) (August 15)
- [Jacob Javits Award for Public Service](#) (August 31)

June AMA House of Delegates Highlights

From June 9th to 15th, Delegates representing State and Specialty Societies from across the country gathered in Chicago for the American Medical Association (AMA) Annual Meeting. For a full recap of the meeting, please visit the [AMA highlights page](#).

The Maryland Delegation is made up of physician delegates elected through MedChi ([The Maryland State Medical Society](#)), as well as physicians in Maryland on other delegations, such as through their specialty society. The Section Council on Psychiatry is made up of physician delegates through [APA](#) (including myself as the Resident Fellow Member [RFM] Delegate), [AAGP](#), [AACAP](#), [AAPL](#), [AAP](#), & [ACLP](#) whereas the Psychiatry Delegation includes the Section Council and psychiatrists on other state delegations.

The meeting started with AMA President, Dr. Jack Resneck's (Dermatology, California) farewell remarks. Dr. Resneck shared some of the advocacy victories from this year such as extending Medicare telehealth coverage, constraining prior authorization in Medicare Advantage plans, and partnering with state medical and national societies to protect patients from inappropriate scope-of-practice expansions. He also shared that the advocacy work that we do to better the profession and improve the health of the nation is unfortunately not a marathon with finish lines – it is tireless, unending work but "...the health of our patients, is itself the enduring common cause that binds us". Visit [here](#) for his full remarks.

In addition to a week of policy discussions, additional [education sessions](#) were provided throughout the week, some of which were recorded in advance. Notable sessions included "Loneliness and Social Isolation: A New Social Driver of Health in Older Adults?", "Reimagining How Mental Health, Wellness, and Burnout are Addressed Among Medical Students and Trainees", and "Mass Casualty Events: Active Shooter Scenes, Triage and Acute Care and Their Aftermath".

The Section Council on Psychiatry or its components brought forth the following resolutions:

- Studying privacy protections and the potential for data breaches of healthcare records in large retail settings
- Encouraging states, including communities and school districts, to adopt legislative and regulatory policies that allow schools to make naloxone readily accessible to school staff, teachers, and students to prevent opioid overdose deaths on school campuses and eliminate barriers that preclude students from carrying naloxone in school
- Studying evidence of the efficacy of physical activity interventions (e.g. group fitness, personal training, or physical therapy) on behavioral activation and outcomes on depressive symptoms
- Declaring a national state of emergency in children's mental health

- Supporting substance use history is part of the medical history & all medical schools train medical students to take a thorough and nonjudgmental substance use history as part of a patient's medical history
- Advocating against the use of psychedelics to treat any psychiatric disorder except within the context of approved investigational studies

MedChi was a cosponsor on resolutions that:

- Study and develop recommendations on how to best protect public health by regulation and oversight of the development and implementation of augmented intelligence and its applications in the healthcare arena
- Study the modern threats to patient privacy, especially in the context of augmented intelligence, and generate recommendations to guide AMA advocacy in this area for the betterment of patient rights

Additional resolutions passed that were related to mental health, including but not limited to:

- Confidentiality of Sexual Orientation and Gender Identity Data (Res 018)
- Improved Foster Care Services for Children (Res 216)
- Reimbursement for Postpartum Depression Prevention (Res 227)
- Increasing Access to Gender-Affirming Care Through Expanded Training and Equitable Coverage (Res 304)
- Amending AMA Policy H-295.858, "Access to Confidential Health Services for Medical Students and Physicians" to Include Annual Opt-Out Mental Health Screening for Suicide Prevention for Residents (Res 307)
- Physician Medical Conditions and Questions on Applications for Medical Licensure, Specialty Boards, and Institutional Privileges (Res 316)
- AMA Public Health Strategy (BOT 17)
- School Resource Officer Violence De-escalation Training and Certification (CSAPH 04)
- Treating Social Isolation and Loneliness as a Social Driver of Health (Res 417)
- Increased Suicide Risk for Children, Youths, and Young Adults in the Welfare System (Res 419)
- Foster Health Care (Res 420)
- Study of Best Practices for Acute Care of Patients in the Custody of Law Enforcement or Corrections (CSAPH 06)
- Clarifying the Role of BMI as a Measure in Medicine (CSAPH 07)

Several elections were held, including President-elect, Speaker, Vice Speaker, Board of Trustees, and various Councils. For full election results, please view [here](#).

On June 13th, Jesse Ehrenfeld, MD, MPH (Anesthesiology, Wisconsin) was inaugurated as AMA's 178th President. Dr. Ehrenfeld is the first openly gay president of the AMA and

June AMA HOD Highlights (Continued)

his address focused on the changes that he's seen in the AMA over his 22 years of involvement, with a focus on continuing to advance equity and battle discrimination. View his presidential address [here](#).

If you have questions about the meeting or topics you would like the AMA to address, please reach out via kdiones1@jhu.edu.

*Karen Dionesotes, MD, MPH
Geriatric Psychiatry Fellow
Johns Hopkins Medicine
APA RFM Delegate to AMA HOD*

USPSTF Recommends Anxiety Screening for Adults

The U.S. Preventive Services Task Force (USPSTF) is [for the first time recommending](#) that adults under the age of 65 receive screening for anxiety disorders. The [final recommendation statement](#) was published in *JAMA*.

Draft FDA Guidance on Clinical Trials of Psychedelics

The FDA [announced](#) it has published its first [draft guidance](#) to highlight fundamental considerations for researchers investigating the use of psychedelic drugs for potential treatment of medical conditions, including psychiatric or substance use disorders. Designing clinical studies to evaluate the safety and effectiveness of these Schedule I controlled substances presents challenges that require careful consideration if those trials are to be considered adequate and well-controlled. The draft guidance also addresses the role of psychotherapy in psychedelic drug development, considerations for safety monitoring and the importance of characterizing dose-response and the durability of any treatment effect. Comments on the draft are being accepted at the link above through **August 25**.

PRMS Resident Resource

Each quarter, PRMS shares a risk management resource to help residents and early career psychiatrists mitigate risk and increase patient safety. Check out their new [Risk Management Plan: Preparing for Private Practice](#).

PRMS offers a **80% premium discount** for moonlighting residents and fellows. [Learn more](#).

Medicare Updates

2021 Medicare QPP Experience Report

CMS released the [2021 Quality Payment Program \(QPP\) Experience Report](#), [infographic](#) and [Public Use File](#) to provide insights into QPP participation. Key 2021 findings include:

- 94% of MIPS eligible clinicians submitted data for one or more performance categories.
- 86% of MIPS eligible clinicians received a positive payment adjustment in 2021 despite the minimum score for a positive payment adjustment increasing from 45 to 60 points.
- 97% of MIPS eligible clinicians avoided a negative payment adjustment.
- The average score for small practices has increased substantially from 43.16 in 2017 to 73.71 in 2021, while the average final score for rural clinicians went from 63.08 in 2017 to 88.44 in 2021.

2022 MIPS Final Score Preview Now Available

CMS has opened the Merit-based Incentive Payment System's (MIPS) Final Score Preview period. [Sign into the Quality Payment Program \(QPP\) website](#) to preview 2022 MIPS scores until final performance feedback, including payment adjustments, is released in August 2023. Preview feedback includes data associated with the highest final score that could be attributed, and the data for calculating it:

- Performance category-level scores and weights
- Bonus points
- Measure-level performance data and scores
- Activity-level scores
- Final Score Preview **doesn't** include payment adjustment information or patient-level reports.

Please see the [Fact Sheet](#) for more information.

AMA Call to Action on Medicare Payments

Physicians are urged to [tell Congress to support legislation](#) that reforms the Medicare payment system and provides annual inflation updates. *AMA has* materials that support the need for a more sustainable, value-based system that better meets the needs of patients and physicians. These resources can be useful in conversations with members of Congress regarding Medicare physician payment system reform. For more information, visit the AMA's [Fix Medicare Now website](#) and see [this article](#) for background and resources.

National Minority Mental Health Awareness Month

In 2006, U.S. Congress dedicated the month of July as "Bebe Moore Campbell National Minority Mental Health Awareness Month," focused on improving mental health services for people of color through education and addressing stigma.

In honor of Bebe Moore Campbell National Minority Mental Health Awareness Month, the APA established the MOORE Equity in Mental Health Initiative. Through this initiative, the APA celebrates each July with a series of events focused on promoting mental health equity for young people of color. [Click here](#) for information about the APA activities and events planned for this month.

The theme of Mental Health America's [2023 BIPOC Mental Health campaign](#) is Culture, Community, & Connection. Black, Indigenous, and people of color (BIPOC) populations have disproportionately faced historical trauma and displacement that can challenge their ability to thrive. Culture, community, and connection are pillars that support and uplift BIPOC individuals in the face of oppression and systemic racism. [Click here](#) to learn more.

SUD Clinicians Loan Repayment Program

Eligible substance use disorder (SUD) treatment clinicians and community health workers can apply to the Substance Use Disorder Treatment and Recovery Loan Repayment Program (STAR LRP) for up to \$250,000 in education loan repayment. If you receive an award, you must work full-time for six years in a STAR LRP-approved facility. **The deadline is July 13.** [Visit the website for details.](#)

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