

# 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](mailto:heidi@mdpsych.org).

MPS News Design & Layout  
Jora Hritz

## President's Column

### Who Shapes MPS?

This past month was Meagan Floyd's first month as MPS Executive Director and Jora Hritz's first month at MPS as Membership Meetings and Publications Coordinator. Heidi Bunes is now enjoying well-deserved extra time with her family as she transitions to her part-time job as Associate Director.

When asked about her time at MPS so far, Jora said that she is "grateful to have found an opportunity to work with the MPS. Heidi and Meagan have been extremely welcoming and patient as I learn all that goes into keeping this organization running. I enjoy coming to work each day knowing that I will have opportunities to be creative, plan exciting events, and assist our members with whatever they may need." She said she has had many positive interactions with everyone and that she looks forward to meeting many of our members in person at future events.

Meagan has also been enjoying her new role. She is excited to work more closely with the MPS Executive Committee and Council and attend meetings with the Maryland Health Department, the Behavioral Health Association, and multiple mental health coalitions. She is enjoying getting to know Jora and is appreciative of Heidi's guidance and support as she transitions into her new role. Meagan said: "I look forward to the future – the MPS has accomplished so much in the 20 years that I have been here – I can't wait to see what we tackle next!" We are lucky to have Meagan, Heidi, and Jora, and are impressed with the work they do!!

Our staff and our MPS committees are key to MPS's work, but MPS is built by our members. One of the themes discussed during our committee chairs meeting in October and in response to feedback from our annual member survey was increasing engagement. Suggestions included holding a general membership meeting with smaller breakout rooms and joining efforts with local mental health organization (like NAMI's) and other professional organizations (like the American Psychological Association, or the American Academy of Pediatrics). Some even suggested starting a podcast to interview our very rich-in-experience members. We welcome any volunteers willing to tell their story. MPS is also working on developing a task force to consider investing and/or spending options for some of the excess funds we have from our recent condo sale. And last but not least, the Council has also voted on the proposed officers for the 2024 election slate!

This past month, we have also been taking steps to create the Subspecialties Committee, approved by Council at our last meeting. We have recruited members to serve as a liaison between MPS and their state or regional psychiatric subspecialty organizations. The members of this committee will keep the MPS updated on the activities and concerns of their subspecialty organizations, facilitate joint advocacy and educational efforts, and highlight accomplishments. We have attempted to start featuring their work by recognizing the presence of some of our members at the American Academy of Child and Adolescent Psychiatry Annual Meeting. Finally, as we prepare to enjoy more holiday time in

Continued on next page

**The MPS Council  
will meet by  
videoconference on  
January 9 at 7:30 PM.  
All members welcome!**

December, we are also preparing for the upcoming busy legislature session, with a Kick off Meeting on December 7, 2023.

Important things are happening in Maryland Psychiatry, including the discussions on the upcoming crisis intervention system in Maryland, which is a state-wide investment on a care continuum of comprehensive behavioral services for Marylanders across the lifespan. This continuum of care consists on having a system where those in need have *someone to call* (988 number), *someone to respond* (mobile crisis systems) and *somewhere safe to go* (crisis stabilization centers and post-crisis support). Over the past months, we have been exploring some of this system's nuances with the stakeholders in order to clarify details and ensure that quality of care is at the forefront for all patients, including those with comorbid medical emergencies or complications. I am grateful for those members with expertise who have helped shaping policy and initiatives on this and other topics on mental health in Maryland, and look forward to seeing many more join to share their knowledge and passion for mental health.

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

## 2024 MPS Dues Notices

The 2024 MPS dues invoices were sent in October via email and USPS. To pay your MPS dues:

- Send your check to the **NEW!** MPS office (1211 Cathedral Street, Baltimore, MD 21201), which reduces our credit card processing costs.
- NEW THIS YEAR! Pay via Zelle: 410-625-0232 which also helps to reduce credit card processing costs.
- You can also pay dues via credit or debit card or PayPal at [www.mdpsych.org](http://www.mdpsych.org) (Select "Contact" and scroll to the "Pay Now" button).

Please email [mps@mdpsych.org](mailto:mps@mdpsych.org) with questions or call the office at 410.625.0232. Thanks for your continued support of the Maryland Psychiatric Society!

## WE HAVE MOVED

### The MPS Office Has Moved

**You can reach us at:**  
1211 Cathedral Street  
Baltimore, MD 21201  
Phone/Text: 410-625-0232  
Fax: 410-547-0915

## MPS Best Paper Awards

The MPS established annual "best paper" awards to recognize outstanding scholarship by young psychiatrists in Maryland. Previous winners are listed [here](#). The Academic Psychiatry Committee is currently soliciting nominations for the 2023 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 2023. 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 2024.

**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 2023. 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 2024.

**Best Paper by a Medical Student Member (MSM):** Eligible students are Medical Student Members who are first authors of papers that were written, in press, and/or published in 2023. 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 2024.

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, including your own, please email the paper to either of the co-chairs below by **January 31**. Please include a brief explanation of why you believe the work is worthy of special recognition.

*Matthew Peters, M.D. [mpeter42@jhmi.edu](mailto:mpeter42@jhmi.edu)  
Traci Speed, M.D., Ph.D. [speed@jhmi.edu](mailto:speed@jhmi.edu)  
Academic Psychiatry Committee Co-Chairs*

## 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 2024! 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.

Winners in past years are listed [here](#). Please [click here](#) for complete details about the process and requirements. **The deadline to enter is January 31**. Electronic copies of posters are due **February 10**. For more information, or to apply [please click here](#).

## November 14 Council Highlights

Support for MPS Strategic Priorities

Dr. Vidal reported efforts aimed at MPS [strategic priorities](#) since the September Council meeting, including the annual directory, soliciting support for November CME meeting, sharing WPS meeting notices with MPS members, advertising MPS paper and poster contest to RFM and ECP members and distributing information on APA Fellowships to RFM members.

Executive Committee Report

Dr. Vidal reported that Ms. Bunes and Dr. Means met with Ms. Garrett at BCRI regarding member concerns related to emergency petitions. The Executive Committee met with Behavioral Health Administration representatives to discuss MPS concerns about revised proposed crisis stabilization center regulations that would potentially lower the standard of care for emergency petition patients. Other MPS advocacy includes [Comments on the Federal Parity Act](#), signing on to a [coalition letter](#) about use of stigmatizing imagery in connection with substance use disorders, [Endorsement of an American Psychological Association statement](#) on Violence in the Middle East, and requesting an MPS seat on the Behavioral Health Care Treatment and Access Commission.

The annual October MPS Committee Chairs Meeting was held in person at the new MPS office location. The meeting had a good turnout and generated positive, productive conversations, including publishing member shoutouts in the MPS News. [See the [November issue](#) for details.]

Dr. Vidal next requested Council approval of the formation of a new Subspecialty Committee. The MPS Subspecialties Committee would be a liaison with psychiatric subspecialty organizations, including Maryland and regional affiliates of the [American Academy of Addiction Psychiatry](#), the [American Academy of Child and Adolescent Psychiatry](#), the [Academy of Consultation-Liaison Psychiatry](#), the [American Academy of Psychiatry and the Law](#), and the [American Association for Geriatric Psychiatry](#). Its members serve as MPS representatives to their respective subspecialty groups and keep the MPS abreast of the activities and concerns of subspecialty organizations. This bi-directional communication will enhance the advocacy efforts on behalf of subspecialty psychiatrists, expand the CME opportunities available to members, and generally raise the profile and highlight the accomplishments of these members within the MPS. This idea for this Committee came from the [2023 MPS Member Survey](#). After some discussion Council unanimously voted to approve the new committee.

Dr. Vidal noted that as of November 1<sup>st</sup>, Meagan Floyd became the MPS Executive Director and a new hire, Jora Hritz, became the Membership Meetings and Publications Coordinator. Heidi Bunes has changed to part-time

Associate Director to assist with the staff transition through June 2024.

She then presented proposed changes to the MPS Operations Manual, which is due for a five-year review. Council discussed EC recommendation to increase the emergency reserve requirement from 120 days to 6 months and discussed secure, electronic file storage options. Other changes include dues billing and the hybrid office. A motion to approve the Operation Manual changes passed unanimously.

Finally, she reviewed the Updated 2023 MPS Committee Goals for Addressing Structural Racism and Inclusion. [See page 5.](#)

Secretary-Treasurer's Report

Dr. Means summarized the third quarter 9/30/2023 financial statements, which were accepted by Council: Total assets are \$435K, up \$32K from last year. Current assets of \$432K are up \$41K and checking/savings are up \$74K with a shift to higher interest bearing accounts. Liabilities of \$67K are down \$40K since this time last year, reflecting less unfulfilled prepaid package orders and no Southern Psychiatric Association meeting. Membership dues are \$165K, \$1K under budget to date. Overall, advertising is \$19K under budget. Package offer income is \$2K under budget. Compared to this time last year, total income of \$372K is \$130K higher. Dues, meeting income and mainly condo sale are the primary contributors. Total expenses of \$273K are \$45K more, with the main factors being coding for new districts, lobbyist fees, meetings, office move and closing, and trivia night.

Dr. Means then presented the proposed 2024 capital budget which includes \$7500 for the purchase of two laptop computers and \$5000 for other expenditures as needed. Council unanimously approved the capital budget.

He reviewed the newly updated MPS investment policy, which now requires 6 months of expenses (1/2 of the annual operating budget) in the emergency reserve account. The MPS has ample operating funds and can consider using the remaining \$36K net proceeds of the condo sale for a special purpose, or those funds could be invested in a higher yielding account. Council discussed several options and unanimously voted to create a financial task force to develop recommendations. The Executive Committee will appoint the task force, which will present recommendations at the February 2024 Council meeting.

Executive Director's Report

Ms. Floyd reported that the 2023-2024 Membership Directory was mailed to members in September and

*November 14 Council Highlights Continued*

generated a surplus. A Career & Practice event was held September 28 and a virtual Psychopharmacology CME will be held November 16, which is free for members. The RFM trivia night will be February 6. 2024 MPS dues (no increase) were first billed October 2 and Zelle payments, which have no processing fees, are now being accepted. She described the staff transition that began this month with Jora Hritz working full-time, Meagan Floyd as MPS Executive Director, and Heidi Bunes working part time and transitioning to retirement.

Nominations and Elections Report

Dr. Hackman presented the proposed 2024 election slate and asked for any additional nominations. Hearing none, Council closed the nominations and voted unanimously in favor of the proposal. [See this page] Dr. Hackman then requested nominations from Council for the APA Assembly Rep and Nominations & Elections Committee vacancies, and noted some possibilities identified already. Council nominated candidates for the positions. [See this page.]

APA Assembly Report

Dr. Shaya presented on behalf of the Assembly Reps and thanked Dr. Palmer for representing the MPS in Dr. Zimnitzky's absence and thanked Drs. Palmer and Hanson for their excellent notes. [See page 11.](#)

MedChi Delegate's Report

Dr. Oviedo reported on the October 28 MedChi House of Delegates meeting. [See page 7.](#)

## 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.*

Supriya Narang, M.D.

**Transfers into Maryland**

George Kolodner, M.D.  
Samuel Adeyemo, M.D., MBChB

## Slate for 2024 MPS Election

**President-Elect** (1-year term)

Ronald F. Means, M.D.

**Secretary-Treasurer** (1-year term)

Tyler C. Hightower, M.D., M.P.H.

**Council** (2-year term, 4 vacancies)

Benedicto Borja, M.D.

Kim Bright, M.D.

Mark Komrad, M.D.

Idris Leppla, M.D.

Cynthia Major Lewis, M.D.

Gulafsheen Quadri, M.D.

Rachna S. Raisinghani, M.D.

Samuel Williams, M.D., MBA

**Resident-Fellow Member Councilor** (1-year term)

Hannah Paulding, M.D.

**MedChi Delegate** (3-year term)

Enrique Oviedo, M.D.

**MedChi Alternate Delegate** (3-year term)

Karen Dionesotes, M.D., M.P.H.

**APA Assembly Representative** (3-year term)

Elias Shaya, M.D.

**Nominations & Elections Committee** (3-year term, 2 vacancies)

Catherine Harrison-Restelli, M.D.

Susan Lehmann, M.D.

Patrick Triplett, M.D.

Crystal Watkins, M.D., Ph.D.

## MPS ADVOCACY DAY IN ANNAPOLIS

**On February 2nd** from 8:30AM—1PM, we invite all MPS members to join us in Annapolis to meet with House and Senate leadership to discuss current and future legislation affecting psychiatry and mental health in Maryland. There are many new legislators this year! MPS lobbyists help with talking points and protocol.

Contact Meagan Floyd (410-625-0232) or [email](#).



Happy Holidays



## Updated 2023 MPS Committee Goals for Addressing Structural Racism and Inclusion

### Academic Psychiatry

Matthew Peters, M.D., Co-Chair  
Traci Speed, M.D., Ph.D., Co-Chair

Commit to publicizing recent papers by psychiatrists of color, including non-members (including contacting regional institutions for information)  
Enhance the diversity of the committee, with emphasis on recruiting and retaining member researchers of color and those from underrepresented communities

### Community Psychiatry & Diversity Coalition

Theodora Balis, M.D., Co-Chair  
Ann Hackman, M.D., Co-Chair

Enhance the diversity of the coalition so that it is more reflective of the people we serve, including intentionally work to recruit residents and fellows from underrepresented groups  
Connect in an organized way with other groups that work to address social determinants of health, equity and related problems to create linkages for MPS members to resources and opportunities for advocacy.  
Advocate for social justice, for the dismantling of structural racism within psychiatry and for accessible and non-discriminatory services for all citizens of Maryland  
Collaborate with other committees across the MPS organization around these issues and initiatives to create synergies that maximize our effectiveness as a group of dedicated psychiatrists

### Distinguished Fellowship

Karen Swartz, M.D., Chair

MPS has a terrific Distinguished Fellowship (DF) committee with a diverse membership. The committee continues to work hard to have MPS nominees for Distinguished Fellowship reflect the diversity of our talented membership.

### Editorial Advisory Board

Bruce Hershfield, M.D., Editor, *The Maryland Psychiatrist*

Publish interviews with members and non-members who can address these issues, either because of their own backgrounds or their research/practice.  
Include members on the EAB who come from minority backgrounds and/or have worked in the appropriate settings.  
Have regular contributions from the MPS Community Psychiatry & Diversity Coalition, local members of Black Psychiatrists of America, and other groups.

### Ethics

Joanna Brandt, M.D., Co-Chair  
Ronald Means, M.D., Co-Chair

The committee will strive to maintain diversity among its members as well as representation from a mix of practitioner types. Additionally, the ratio of new and experienced committee members should be balanced.  
When planning CME programs with ethical implications, the committee will specifically consider the impact of structural racism in all topics discussed.

### Executive

Carol Vidal, M.D., Ph.D., Theodora Balis, M.D., Ronald Means, M.D., and Jessica Merkel-Keller, M.D.

Continue to follow up regularly with MPS committees to ensure that all MPS' committees are addressing these areas.

President and President-elect will continue to attend Nominations & Elections Committee meetings as ex-officio and invited guest participants to support the appointment of a diverse group of members on the annual election ballot for top MPS leadership positions.

Continue to track progress of participation by underrepresented MPS members (these will be absolute numbers due to incomplete member data):

Executive Committee  
Councilors  
Assembly Reps/MedChi Delegates  
Committee Chairs  
Committee Members  
Member Advancements to Distinguished Fellow

Host/Coordinate Annual MPS General Membership Meeting, which will include discussion of recent Maryland bills/initiatives that highlight issues relevant to minorities.

### **These Executive Committee goals below are to be postponed until a later date:**

Expand member demographic data to enable metrics that include calculations of percentage representation of minority members vs non-minority for the items noted below:  
Referral Service  
Listserv  
Interest Groups  
Member Advancements to Fellow  
CME Programs  
Annual Dinner Meeting  
Other MPS Events

## *Committee Goals for Addressing Structural Racism and Inclusion Continued*

### Legislative

Annette L. Hanson, M.D., Co-Chair  
Michael Young, M.D., Co-Chair

We are already, and have consistently supported, legislation regarding improved pretrial and pre-arrest diversion programs to decriminalize mental illness. We endorse and support legislation for grants to improve psychiatric services in correctional facilities as well as CIT training programs for law enforcement to reduce the likelihood of deadly encounters between police and people with mental illness in communities with racial disparities. Issues related to voter suppression, immigration, and sentencing are beyond the scope of our committee's abilities except as these issues relate to people with mental illness. We continue to support bills that increase access to care for underserved communities (like through telehealth and workforce expansion bills). We also reached out and included residents with the aim of including more MUR members.

### Membership & Recruitment

Karen Dionesotes, M.D., M.P.H. Co-Chair  
Theodora Balis, M.D., Co-Chair

Continue to recruit psychiatrists that reflect the diversity of psychiatrists practicing in Maryland in order to diversify MPS membership  
Ensure that both new members and potential members have a warm handoff as an introduction to MPS, from a current MPS member. Implement an "ambassador" program to support diversifying MPS membership.  
Identify any demographic gaps in members of the Membership Committee and recruit new committee members so the group is more representative of MPS membership.

### Program & Continuing Medical Education

Joshua Chiappelli, M.D., Co-Chair  
Paul Nestadt, M.D., Co-Chair

The CME committee is in full support of promoting anti-racism and social justice. We will continue to center the voices of people of color and people from marginalized communities. This not only includes highlighting speakers from diverse backgrounds, but also topics relevant to social justice and health care disparities as part of our broader curriculum. We will continue to examine how CME projects are chosen in order to promote understanding about different cultures. We are exploring the feasibility of a joint conference with MedChi focused on disparities in access to care as well as the history of racism in medicine and psychiatry. We welcome members to suggest and spearhead other relevant webinars and events.

## 2023 AMA Interim Meeting Highlights

The AMA House of Delegates (HOD) met last month in National Harbor, Maryland.

The HOD made it clear that the unsustainable Medicare payment system poses a dire threat to patients' access to high-quality physician care across the nation. In addition to this year's 2% cut in Medicare physician pay, doctors face a further 3.37% cut set to take effect in January. Leading the [charge to reform Medicare pay](#) is part of the [AMA Recovery Plan for America's Physicians](#). The AMA and nearly 120 other medical professional associations (including APA) sent a [joint letter](#) to congressional leaders urging them to cancel the cut and fix Medicare's systemic problems..

The AMA maintained its pluralistic approach to health system reform and opposition to single payer.

Newly adopted policy on physician network inadequacies encourages multiple approaches for regulatory oversight, including meaningful standards, transparency of network breadth, parameters for out-of-network care, and effective monitoring and enforcement of existing standards. Learn about the [AMA's plan on network adequacy](#).

The House of Delegates restated the need for state medical boards to maintain oversight in the regulation of nonphysician health professionals, and reaffirmed requiring health professionals to disclose the license under which they are practicing and preventing deceptive practices such as nonphysician health professionals presenting themselves as physicians or "doctors."

The AMA Fix Prior Auth campaign advocates for [properly trained and licensed physicians being involved in determining medical necessity](#). When clinicians who are not trained, licensed and qualified to diagnose medical conditions or determine medical necessity are involved in utilization management, prior authorization, Medicare and Medicaid audits and regulatory surveys, it creates unnecessary hurdles to safe, timely and equitable practice of clinical medicine.

The HOD adopted policy to require health insurers to collect patient cost-sharing and pay physicians their full allowable amount for the health care services provided, unless physicians opt-out to collect such cost-sharing on their own.

New policy was added to the AMA [Resident and Fellows' Bill of Rights](#) framework for protecting resident well-being, which encourages the formation of peer-led resident and fellow organizations to advocate for trainees' interests.

For more details about the meeting, please [click here](#).

## Maryland News

### MedChi Delegate's Report 10-28-23

The MedChi annual meeting on October 28th began with a stellar presentation titled "Child Behavioral Health: How can our House of Medicine Address this Crisis?" It was well attended, and it was affirming to see that MedChi and all of medicine is taking mental health care seriously. The presenters were Dr. Laura Herrera Scott (Maryland Secretary of Health), Dr. James York (MedChi President), Elizabeth McQuarrie LCSW-C, and our esteemed colleague **Dr. Sanaz Kumar** (child & adolescent/forensic psychiatrist). The panel outlined the current state of pediatric mental health, data that is being gathered and tracked, holes in the system, issues related to equity, and efforts that are being made to develop a more effective delivery system.

One House of Delegates (HOD) resolution that MPS followed was approved at the reference committee meeting; Resolution 17-23: Expanding Coverage and Access to Telemedicine for Mental Health Services which was written by the Medical Student Section. This resolution outlined the struggles patients face with access to care for both mental health and substance use disorder treatment. It recommended eliminating the requirement for in-person appointments (including for Medicare patients). The resolution also highlighted the need for monitoring and strategies to mitigate fraud (the Health and Human Services office estimated there was \$4.5 billion in fraudulent telehealth-related fraud last year).

Resolution 6-23 – Supporting the Establishment of Universal Single-Payer Health Care received a lot of attention and was passionately debated. Delegates discussed the different aspects of converting to a national unified financing healthcare system. While everyone agreed our current system is broken in many ways, participants pointed out that other health care systems such as the Canadian and UK systems who have a single payer system seem equally as broken, just in different ways. Given that no consensus could be reached, this resolution was referred to the MedChi board for further study.

The MedChi Operations report can be found [here](#).  
The MedChi Final Reports and Resolutions can be found [here](#).

*Enrique Oviedo, M.D.  
MedChi Delegate*

### Survey on Drug Use and Health

SAMHSA released the results of the [2022 National Survey on Drug Use and Health](#), with data on mental health, substance use, and treatment related behaviors among people in the U.S. in 2022.

### New Maryland BH Commission

The [Maryland Commission on Behavioral Health Care Treatment and Access](#), which was established in the 2023 legislative session, held its first meeting on November 9. A recording is available at the link above.

Its purpose is to make recommendations to provide appropriate, accessible, and comprehensive behavioral health services that are available on demand to individuals in the State across the behavioral health continuum. The statute requires the following four workgroups:

- Geriatric Behavioral Health
- Youth Behavioral Health, Individuals with Developmental Disabilities, and Individuals with Complex Behavioral Health Needs
- Criminal Justice-Involved Behavioral Health
- Behavioral Health Workforce Development, Infrastructure, Coordination, and Financing

Aliya Jones, M.D. is the only psychiatrist on the 37-member commission. She was appointed by Governor Moore to represent acute care hospitals. She is assigned to the Criminal Justice-Involved workgroup.

The presentation for the inaugural meeting, which is available on the website, includes extensive data for several areas, as well as information about previous Maryland behavioral health initiatives.

### Mental Health Advance Directives

The Maryland Health Care Commission is working with the Behavioral Health Administration to develop a public awareness campaign for mental health advance directives as required by [Chapter 297, Public Health – Mental Health Advance Directives – Awareness and Statewide Database](#) passed in the 2023 legislative session. A [new flyer](#) for behavioral health care professionals aims to build awareness about mental health advance directives, what elements are included, and how to view them using CRISP.

Download a template Maryland Mental Health Advance Directive Form at <https://health.maryland.gov/bha/Pages/newforms.aspx>.

Visit the National Resource Center on Psychiatric Advance Directives site at <https://nrc-pad.org/> for more information.

## Maryland News

### Interstate Telehealth Expansion

The Maryland Health Care Commission (MHCC) conducted an [Interstate Telehealth Expansion Study](#) in collaboration with stakeholders at the request of the Health and Government Operations Committee. The study focused on ways to expand interstate telehealth to provide more options for residents to receive services from out-of-state practitioners. Increasing diffusion of interstate telehealth can be complex absent a federal framework for a license to practice nationally. Varying licensure rules across state health occupation boards and requirements around malpractice insurance and health insurance coverage were considered to develop recommendations that aim to inform a progressive framework for advancing interstate telehealth.

The [report](#) includes the landscape of interstate telehealth and supporting justification for nine recommendations and four notable considerations, of which five necessitate legislation, two regulation, and six policy. Findings from the study are intended to guide State policymakers, health occupation boards, and other stakeholders in expanding interstate telehealth in ways that improve access to care and maintain continuity of care for Maryland residents. Among the recommendations are:

- The General Assembly should continue adopting legislation to implement interstate compacts to improve consumer access to providers
- Health occupation boards should develop new pathways to licensure; continue to begin/renew conversations regarding the development of licensure by reciprocity and endorsement agreements
- The General Assembly should enact legislation to allow health occupation boards to adopt a limited use telehealth out-of-state license
- Health occupation boards should permit providers with an active unencumbered license in another state to deliver telehealth services to preserve continuity of care for existing patients

### New PDMP Clinical Tools

Maryland PDMP-registered prescribers with individual DEAs can access new clinical tools through the CRISP Portal "Prescriber Reports" tab. The Prescriber Insights Report shows trends in a prescriber's history and compared with their peers. The Buprenorphine Comparison Report lists the number of patients receiving buprenorphine for substance use disorder treatment with a comparison to peers. Please see the resources below:

[Prescriber Insights Report Booklet](#)  
[Buprenorphine Comparison Tool Quick Guide](#)  
[Clinical Tools Quick Guide](#)

### 2024 MedChi Legislative Priorities

The Maryland General Assembly's 47 Senators and 141 Delegates to the House meet in Annapolis to debate and consider proposed changes to state laws and regulations. MedChi's advocacy team and physician leaders carefully review all legislation to determine whether passage could impact the practice of medicine and patient care. MedChi's [Legislative and Regulatory Priorities](#) are critical topics that are anticipated for legislation being introduced. The behavioral health priorities include:

- Expand Maryland's crisis treatment centers.
- Support efforts to ensure the appropriate response to individuals facing a behavioral health crisis.
- Advocate for comprehensive behavioral health reform that addresses current system deficiencies.

### HEAU Saves Patients Over \$3M

Maryland Attorney General Anthony Brown [announced](#) that the Health Education and Advocacy Unit (HEAU) within the Consumer Protection Division closed 2,037 cases in Fiscal Year 2023, helping patients save or recover over \$3.3 million dollars, including more than \$2.6 million in appeals and grievances cases. The information was included as a part of the comprehensive [Annual Report](#) on the Health Insurance Carrier Appeals and Grievances Process submitted to the General Assembly.

The report notes, "Adverse decisions involving mental health/substance abuse services continue to be overturned or modified infrequently. In FY 2023, carriers reported an **overturned or modified rate of 37% for mental health and substance abuse services.**" It also includes a vignette involving network adequacy, "The HEAU has handled ongoing mental health access issues for a family with a 16-year-old autistic son. The carrier has no in-network providers available to provide the child with all necessary services and was unwilling to approve telehealth services. Instead of providing the needed care, the insurer attempted to reduce needed services. The insurer also initially denied a single case agreement (SCA) with an out-of-network provider without considering the child's unique needs. After HEAU intervention, the insurer entered an SCA with an out-of-network provider (for six months) and restored telehealth services. Although this arrangement is providing needed care, the insurer has not yet agreed to a longer-term means of meeting the child's needs."



## Maryland News

### Unenrolled Medicaid Prescribers

The Maryland Medicaid Office of Provider Services again shared its plans to deny pharmacy prescription drug claims where the prescribing practitioner is not actively enrolled with Medicaid. [Those who do not participate with Medicaid for payment of services must still [enroll](#) as ORP (Ordering Referring Prescribing) Provider.] Phase 1 denials will begin January 3, 2024, which will be for non-behavioral health drug classes only. Phase 2 denials will begin in July - when Medicaid will deny ALL pharmacy claims regardless of drug class if the prescriber is not enrolled, including those in behavioral health drug classes. The MPS will assist with outreach to any unenrolled psychiatrists. If you are not enrolled, please remember to ask whether patients have recently switched to Medicaid coverage to avoid possible lapses in coverage of your prescriptions.

### Prescription Drug Affordability Update

On November 27, the Maryland Prescription Drug Affordability Board heard comments on its proposed regulations for selecting drugs for cost review and the study process. [Click here](#) to review several public comments received and details of the regulations. *Maryland Matters reported* that two rules were finalized during the meeting, including a list of definitions and procedure for public comments, as well as an outline of the cost review process that could result in price-lowering efforts.

### Optum Provider Self-Assessment Tool

Optum Maryland has posted revised and simplified program quality self-assessment tools for 2024-2025 on its [Provider Resources](#) page. Please click to view the self-assessment tools for the following:

- [Behavioral Health Program](#)
- [Individual Practitioner](#)
- [SUD Program](#)

### Enhanced Understanding of Asian Americans

The Montgomery County DHHS Asian American Health Initiative recently launched a new resource, "[Untold: Exploring Asian American Experiences](#)." This thoughtfully curated collection enhances understanding of diverse Asian American experiences via avenues for exploration, including museums, scholarly articles, impactful movies, and insights into how Asian Americans are portrayed in contemporary media.

- Online version of the guide <https://aahiinfo.org/wp-content/uploads/2023/09/Untold.pdf>
  - Also available with other excellent info under Mental Health Resources at <https://aahiinfo.org/aahi-resources/>
- Please email AAHI Program Manager I [Muhammad Hasan](#) with questions.

### Member Shoutout

Johns Hopkins surgeons recognized third-year psychiatry resident **Samia Osman, M.D.**, which led to her winning the House Staff Council's Resident of the Month Award. "Dr. Osman ... is an excellent consulting physician who goes above and beyond for our patients and for our team. She has exceptional bedside manner, and she exemplifies excellence in teaching. She is incredibly thorough, knowledgeable, smart, level-headed, and unflappable, even when we (surgery) call after hours. She shows the utmost professionalism and collegiality. We are so grateful to have her as a colleague."

Drs. **Joe Bienvenu** and **Pat Triplett** are lead authors on a new paper in *General Hospital Psychiatry*, "[Proactive versus traditional psychiatric consults in a large urban academic medical center](#)," which compares a year of data from the medical-surgical services at JHH. The data were based on 21,000 patients admitted to the 23 wards covered by the traditional consult team, and 5,000 patients on the 6 wards covered by the proactive teams. Twenty-five percent of patients served by proactive consultants received consults vs only 4% of those served by the traditional team. For those consulted on by the proactive team the length of stay was 9 days compared to 19 days for the traditional team. Also, patients on wards covered by proactive teams were 4 times more likely to be transferred to psychiatric units. Kudos also to co-authors Drs. **Paul Nestadt** and **Liz Prince** for this work.

### General Assembly to Convene

The Maryland General Assembly, including several newly elected legislators, will start the 90-day session next month. The coming year is expected to be busier than usual and the MPS Legislative Committee has already been working on bill drafts. As a member of the Behavioral Health Coalition, MPS is also involved with the Coalition's 2023 Behavioral Health Crisis Prevention Platform. More to follow in the coming months.

### Free Climate Change CME

On **December 6**, Sheppard Pratt will host Climate Psychiatry Alliance co-founder Janet Lewis, M.D. who will present a virtual CME, *Mental Health Treatment and Climate Change*, from noon to 1 PM. [Click here](#) for more information or to register.

## Member Publications

The MPS recognizes several members on a variety of research contributions that were recently published.

**Scott Aaronson, M.D.** was a co-author on a September 2023 article, [Psychedelics, With a Focus on Psilocybin: Issues for the Clinician](#), published in *Journal of Psychiatric Practice*. He was also first author on a November 5 article, [Alternative metrics for characterizing longer-term clinical outcomes in difficult-to-treat depression: II. Sensitivity to treatment effects](#), in *Australian & New Zealand Journal of Psychiatry*.

The September issue of *Advances in Psychiatry and Behavioral Health* included multiple contributions from MPS members:

- **Afifa Adiba, M.D.** was first author on [Advances in Child Psychiatry Education and Training](#)
- **Vedrana Hodzic, M.D.** and **Sarah Johnson, M.D., J.D.** authored [Crisis Management in Psychiatry: Overview and Training](#).
- **David McDuff, M.D.** was a co-author on [Retirement from Elite Sport: Factors Associated with Adjustment and Holistic Health Outcomes](#).
- **Lindsay Standeven, M.D.** was first author on [Polycystic Ovary Syndrome: A Guide for Psychiatric Providers](#).
- **Christopher Miller, M.D., Hinda Dubin, M.D.,** and **Mark Ehrenreich, M.D.** authored [Current Landscape, Obstacles, and Opportunities in the Teaching of Psychotherapy in Psychiatric Residency](#).

**Justine Larson, M.D., M.P.H.** wrote [Puberty for Transgender Kids and Their Parents: Impressions from a Mom](#) for the October issue of *Child and Adolescent Psychiatric Clinics of North America*.

**Jennifer Coughlin, M.D.** has a paper in *JAMA Network Open*, [Imaging Brain Injury in Former National Football League Players](#), that compares sets of 27 former NFL players and collegiate swimmers. The results are consistent with her earlier papers that showed elevated rates of a marker of brain injury and repair indicative of activation of the brain's inflammatory response in former NFL players. Neuropsychological testing showed the NFL players performed worse globally, and specifically in learning and memory, compared to swimmers.

## Member Spotlight Submissions

Recently worked on an exciting research project, reached a milestone in your career, or have advice for younger psychiatrists? Submit a short article and photo [here](#) to showcase your experiences. We will share your responses on social media and in our newsletter. If you have any questions please call 410-625-0232.

## Thank You!

The following members paid additional MPS dues for 2024 even though they qualify for reduced dues because of their Rule of 95 life status. **We appreciate your support of the Maryland Psychiatric Society!**

Tom Allen, M.D.  
Virginia Ashley, M.D.  
Mark Ehrenreich, M.D.  
Anita Everett, M.D.  
Art Hildreth, M.D.  
Geetha Jayaram, M.D.  
Jill Joyce, M.D.  
Mohammad Maisami, M.D.  
Russell Margolis, M.D.  
Gary Nyman, M.D.  
Jay Phillips, M.D.  
Robin Weiss, M.D.

## Kudos to MPS Child and Adolescent Psychiatrists!

Maryland Child and Adolescent Psychiatrists had a remarkable presence at the [American Academy of Child and Adolescent Psychiatry](#) (AACAP) annual meeting in NYC in October.

Special congratulations to **Joyce Harrison, M.D.** who was presented with the AACAP Simon Wile, MD, Leadership in Consultation Award at the 2023 AACAP Annual Meeting Distinguished Member Awards and to **Vittoria DeLucia, M.D.**, from Sheppard Pratt, who received the [PsiFI initiative](#) that seeks to strengthen psychodynamic psychotherapy training in child and adolescent psychiatry residency programs through faculty development. Kudos as well to **Dr. Mary Cutler**, who is an assembly member.

Among Johns Hopkins Child & Adolescent Psychiatry Faculty, there were participants in 36 of 52 events. Faculty were chairs, presenters and discussants at clinical perspectives (e.g.: **Joyce Harrison, M.D.**), new research posters (**Carmen Lopez-Arvizu, M.D., Michelle Miller, M.D.** and **John Campo, M.D.**), committee chairperson meetings, media forums (**Brandon Newsome, M.D.**), special interest groups (**Jennifer Dorr, D.O.**), symposia (e.g.: **Joyce Harrison, M.D.** and **John Campo, M.D.**), and workshops (**Joyce Harrison, M.D.**), including 23 new research posters!

Kudos as well to MPS Psychiatrists **Carmen Lopez-Arvizu, M.D., John Campo, M.D., Carol Vidal, M.D., Ph.D.** and **Paul Nestadt, M.D.** who presented at the 2023 [International Summit on Suicide Research](#) in Barcelona, Spain.

# APA News & Information

## November 2023 APA Assembly Highlights

Drs. Hanson and Shaya contributed to the Territorial Acknowledgement for the Area 3 Council Meeting. Dr. Palmer represented the MPS at all meetings in Dr. Zimnitzky's absence and took excellent notes.

Assembly Speaker Dr. Vasilis Pozios reported on:

- Streamlining Assembly operations
- Raising the profile of the Assembly among the membership
- Increasing collegiality among members
- New Satisfaction and Sustainability Workgroup
- Advocacy via the Assembly improves outcomes and fosters change
- Heightened focus on Diversity, Equity, and Inclusion
- Financial constraints impacting the Assembly due to APA deficit

APA President Dr. Petros Levounis focused on the May 2024 meeting with the educational theme Addiction.

APA President-Elect Dr. Ramaswamy Viswanathan stated that his presidency's theme will be Life Style & Mental Health as well as Climate Psychiatry.

APA Treasurer Dr. Richard Summers reported on financial constraints with decreased revenue in the context of high inflation. DSM is the most significant APA source of income. Overall APA publications revenue is down 33% with a similar decrease in annual meeting revenue but reserves and Investments did well. The budget deficit was \$100,000, but the actual operating loss ended up being a total of \$7.8 Million. However, this was mitigated by shifting money from reserves and investments to bring the deficit down to \$4.4 Million.

### Other highlights

Evaluations seem to demonstrate good evidence of Diversity, Equity, and Inclusion at the APA.

Practice Guideline for treating patients with Borderline Personality Disorder was endorsed.

Considerations to align future DSM editions with ICD11 diagnostic criteria and coding

Advocacy regarding CoCM

Assembly Nominating Committee Chair Dr. Adam Nelson presented nominees for:

Speaker Elect – Drs. Evan Eyler, Ken Bush, and Raymond Reyes

Recorder – Drs. Ray Chow, Jim Polo, and Debra Barnett

Dr. Saul Levin announced he is leaving as CEO & Medical Director in 2024. The finalists being considered to replace him are all board-certified psychiatrists.

### Action Paper Highlights

#### **Passed:**

Ensuring that APA CEO & Medical Director is a psychiatrist with some form of Board Certification passed with virtually unanimous support.

Promoting Guidelines for the prevention of Patient Assaults on Mental Healthcare Employees

Shifting from using the term Correctional Psychiatry to Carceral Psychiatry

Removing the Exclusion of Electroconvulsive Treatment from Advanced Health Directives

Resident Physician Collective Bargaining

Continued In-Person Fall Assembly Meetings

Ageism

#### **Failed**, with significant debate and controversy:

Defining dangerous influences in the political process in American democracy

Addressing the mental health impacts of false information

Please use the links below to contact your Assembly Reps for more details.

[Annette Hanson, M.D.](#), [Elias Shaya, M.D.](#), and [Jennifer Palmer, M.D.](#) as alternate for [Brian Zimnitzky, M.D.](#)

## Opioid Epidemic in the African American Community

The Unequal Impact of the Opioid Epidemic in the African American Community: Insights for Psychiatrists

Join the APA on **December 7th at 7 PM** for their next presentation of "The Looking Beyond Series: Mental Health Equity Fireside Chats": An APA lecture series that examines strategies and opportunities to improve the mental health of historically marginalized and minoritized communities.

African Americans are experiencing rising opioid-related overdoses, with the third highest opioid-related overdose death rate compared to other race/ethnicities, largely driven by synthetic fentanyl and heroin. Disparities and inequities are exacerbating the public health crisis in African American communities as evidenced by the higher rate of overdose deaths in U.S. counties with greater income inequality. This panel will unpack the complexities of the unequal impact of opioids in the African American community and evaluate the role of implicit bias, stigmatization, and cultural stereotypes in shaping perceptions, diagnoses, and treatment approaches for opioid use disorder in African American patients.

## APA News & Information

### New Addiction Resource Document

APA worked with the American Academy of Addiction Psychiatry, the American Academy of Family Physicians, and the American Society of Addiction Medicine to develop two resource documents listing the top 10 facts that both the public and every physician should know about addiction:

"[Top Ten Things Everyone Should Know About Addiction](#)" provides basic facts about addiction.

"[Top Ten Things Every Physician Should Know About Addiction](#)" emphasizes the judgment that patients often face and encourages physicians to reduce stigma by spreading the message that addiction is a treatable chronic illness.

### Members Only Resource

The [APA Practice Management Helpline](#) (login required) is a great member benefit with one-on-one help for practical problems related to managing a practice. Contact [practicemanagement@psych.org](mailto:practicemanagement@psych.org) or leave a message at (800) 343-4671 with any questions.

### Apply for 2023-24 Fellowships

The [APA/APAF Fellowships](#) application is open through March 15, 2024. Fellowships provide psychiatry residents experiential learning, training and professional development to become leaders in the field. Fellows receive mentorship from APA member experts, get exclusive opportunities to be a part of APA leadership councils, and network with APA members from around the country.

### Free Virtual OCD & Anxiety CME Lectures

Sheppard Pratt's Fall Lectures continue with two sessions to be held **December 8**. [Click here](#) for more information or to register.

Intensive Process-Based CBT for Adolescents with Severe OCD and Related Disorders  
Presented by: Marla W. Deibler, PsyD, ABPP from noon to 1:30 PM

Multimodal Treatment of Pediatric OCD: Outcomes at Higher Levels of Care  
Presented by: Martin E. Franklin, PhD from 1:45 to 3:15

### Members Out & About

**Ilana Cohen, M.D.** spoke with the NY Times about the use of Ozempic to counter weight gain caused by antipsychotics and antidepressants. Read the November 3 article, [Some Psychiatrists Have Started Prescribing Ozempic](#).

**Ikwunga Wonodi, M.D.** was interviewed regarding new outcomes and innovations in treatment for an October 20 [Strides in Schizophrenia](#) article in JMORE.

**Kamal Bhatia, M.D.** was featured in an October 26 article, [Mental health in focus: A look at the physical effects of depression](#), in AFRO News.

**Mark Komrad, M.D.** gave a webinar last month that examined the ethical issues for psychiatrists in countries where some patients are asking their psychiatrists to provide, rather than prevent, their suicide. In some European countries euthanasia is available to psychiatric patients with non-terminal mental illnesses. Treatment futility is a common criterion.

### Nominations for Anti-Stigma Advocacy Award

The [Maryland Foundation for Psychiatry](#) presents an annual award to recognize a worthy piece published in a major newspaper or on public media 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.

The article should be published or produced during the period from January 15, 2023 to January 9, 2024. A Maryland author and/or newspaper or major media outlet is preferred. [Click here](#) for past winners and published articles.

The award carries a \$500 prize, which is given at the Maryland Psychiatric Society annual meeting in April. Please send nominations to [mfp@mdpsych.org](mailto:mfp@mdpsych.org) by **January 10, 2024**.

The MFP is organized for educational and charitable purposes. For more information, please visit the [website](#).

### 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.](#)

# Medicare Updates

## 2024 Medicare Fee Schedules Available

Novitas announced the 2024 Medicare physician fee schedule is available for download in PDF, Excel and TXT formats in their [online tool](#). Individual code lookups will be available beginning January 1, 2024.

## Speak Out on Medicare Rates

AMA is urging physicians to contact their lawmakers to help stave off the 2024 Medicare payment cut and to encourage their members of Congress to reform the payment system under which physicians are the only health care professionals who do not receive an annual adjustment for inflation. [Click here](#) for details about what's in store for next year and how to join in this effort.

## Preview 2022 Medicare Performance Data

The Doctors and Clinicians Preview Period is open **through December 12 at 8 PM**. Preview your 2022 Quality Payment Program (QPP) performance information before it appears on the Medicare.gov [compare tool](#) and in the [Provider Data Catalog \(PDC\)](#), which assist Medicare patients and caregivers to find doctors and incentivize clinicians to improve patient care. Please see the [User Guide](#) for more details. Access the secure Preview through the [QPP website](#). Find small practice assistance at [this link](#).

## Check Final 2023 MIPS Eligibility Status

Your status may have changed, so confirm your final 2023 MIPS eligibility status using the [Quality Payment Program \(QPP\) Participation Status Tool](#) for the Merit-based Incentive Payment System (MIPS). Your status is updated based on Medicare Part B claims and Medicare Provider Enrollment, Chain, and Ownership System (PECOS) data from the second segment of the [MIPS Eligibility Determination Period](#) (October 1, 2022 – September 30, 2023). For More Information, see the [MIPS Participation Options Overview](#).

You can also check your initial 2024 MIPS eligibility status using the [QPP Participation Status Tool](#). To be eligible to participate in MIPS in 2024, you must:

- Bill more than \$90,000 a year in allowed charges under the Medicare Physician Fee Schedule (PFS); AND
- Furnish covered professional services to more than 200 Medicare Part B beneficiaries; AND
- Provide more than 200 covered professional services under the PFS.

## Gains for Psychiatry in Medicare Fee Schedule

*Psych News* [reports](#) that APA advocacy scored victories for psychiatrists and patients in the [2024 Medicare Physician Fee Schedule](#), including policies for reimbursement, outpatient telepsychiatry, MIPS (Merit-Based Incentive Payment System) reporting, and virtual supervision of trainees. The new policies will go into effect January 1, 2024.

CMS accepted APA's recommendation to increase the relative value units (RVUs) for psychotherapy codes used alongside a code for an evaluation and management (E/M) services by approximately 19.1%, phased in over four years. For 2024, this will result in an increase in payment for psychotherapy visits of between \$3 and \$6.

Additionally, CMS approved a new E/M add-on code (G2211), which can be used in addition to codes for outpatient E/M services to recognize the resource costs associated with care of patients with chronic or complex conditions.

The 2024 fee schedule includes more good news:

- The temporary policy to reimburse outpatient telepsychiatry in the patient's home (code POS 02) at the same rate as in-person care is extended through 2024. (The patient's home can include temporary lodgings or other community-based settings.)
- Medicare practitioners may continue to report their practice location instead of home address when providing telehealth services from their homes.
- Payment for telehealth services delivered by Federally Qualified Health Centers (FQHC) and Rural Health Clinics (RHC) without a prior in-person visit is extended through 2024.
- Through 2024, resident physicians can continue to be virtually supervised when they are delivering telehealth. However, in-person care delivered by residents must still be supervised in person, and training sites should be ready for this beginning in January. (Except if the resident and patient are in rural areas where virtual supervision is permitted.)
- CMS will maintain the MIPS reporting threshold for neutral payment adjustments at 75% for an additional year, alleviating the pressure to increase MIPS reporting.
- CMS payment for audio-only periodic assessments in opioid treatment programs is extended through 2024.
- Services in intensive outpatient programs (IOP) will be covered when delivered by hospital outpatient departments, community mental health centers, RHCs, and FQHCs.

For more information, see the [2024 Physician Fee Schedule fact sheet](#).

## Medicare Updates

### Medicare Coverage for Behavioral Health

Medicare pays for behavioral health services to improve patient outcomes:

**Behavioral Health Integration (BHI) Services:** The BHI model incorporates behavioral health care into other health care to improve mental, behavioral, or psychiatric health for many patients. Medicare covers 2 types of BHI services.

**Psychotherapy for Crisis:** These services are appropriate for patients in high distress with life-threatening, complex problems that require immediate attention to help reduce a patient's mental health crisis (including substance use disorder).

**Opioid Use Disorder (OUD) Screening & Treatment:** Medicare pays for OUD screenings performed by physicians and non-physician practitioners and for certain treatment services provided to patients diagnosed with OUD.

Please see the CMS [letter](#) to learn more.

## ANNOUNCING 2024 Package Options

Advertising with MPS is an effective way to reach psychiatrists with your message



See which new MPS Package Option is best for you

## CLASSIFIEDS

### EMPLOYMENT OPPORTUNITIES

**Clifton T Perkins Hospital Center (CTPHC)** is recruiting for board certified and board eligible psychiatrists to work in this maximum security forensic setting. CTPHC is Maryland's only maximum security, forensic psychiatric hospital. Come lead a dynamic and growing multidisciplinary team providing inpatient psychiatric services to patients with major mental illnesses who have court involvement. Patients are deserving of excellent care, cases are interesting and often unique, and the work is professionally rewarding. The compensation package is generous, as are State of Maryland benefits. Please contact Dr. [Robert Wisner-Carlson](#), Clinical Director, at 410-724-3075. Applications can be placed on the [State of Maryland JobAps](#), noting Howard County work location.

### PRACTICE ACCEPTING PATIENTS

**Ketamine Assisted Psychotherapy Groups** Baltimore's only physician-led KAP Groups Do you have patients who have not had an adequate response to antidepressants? Perhaps they remain depressed, or anxious, or have negative ruminations that fuel their disorder. Perhaps they are just stuck and need a new perspective. For more information: [DinahMiller@yahoo.com](mailto:DinahMiller@yahoo.com) or 410-852-8404

### OFFICE SPACE AVAILABLE

**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.

RESIDENTS AND FELLOWS

## TRIVIA NIGHT

**FREE**

Dinner  
Open Bar  
Trivia  
Cash Prizes

TO REGISTER, OR  
FOR MORE  
INFORMATION  
INCLUDING RULES  
AND PRIZES [CLICK  
HERE](#)

**HomeSlyce Pizza Bar**

336 N Charles St.  
Baltimore, MD 21201

**February 6**

**@6-9PM**

*This event is open to members, non-members and their guests.  
You may reserve up to 2 tickets.*

### PRMS Resource

The [latest](#) quarterly "[Hoot What Where](#)" newsletter is out with tips on the Treating vs the Forensic Role, managing risk with controlled substances prescribing, and 10 things about suicide.

# ENDLESS POSSIBILITIES for Psychiatrists at Sheppard Pratt

Applicants must be board certified or board eligible and have a current Maryland-issued license at the time of hire. Some positions require an on-call schedule.  
Current openings include:

**Child and Adolescent Psychiatrist**  
Multiple Settings | Towson, MD

**Psychiatrist**  
Inpatient Geriatric Unit | Towson, MD

**Medical Director**  
CalvertHealth | Prince Frederick, MD

Scan QR code to  
see all openings



At Sheppard Pratt, you will be surrounded by a network of the brightest minds in psychiatry led by a bold vision to change lives. We offer:

- Robust resources to develop your career
- Cutting edge research and technology
- A generous compensation package with comprehensive benefits

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For more information, please contact:  
Emily Patrick, Director of Provider Recruitment at [emily.patrick@sheppardpratt.org](mailto:emily.patrick@sheppardpratt.org)

**About Sheppard Pratt**

Consistently recognized as one of the top national psychiatric hospitals for more than 30 years, 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](http://sheppardpratt.org) to learn more about our services. EOE.