

# MPS NEWS

Volume 37, Number 10

Editor: Heidi Bunes

February 2024

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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

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

## President's Column

### The Maryland Legislative Session is On!

The Legislative Committee, including both MPS and WPS members, discusses legislation that is vital to the care of our patients and to our profession. Last week, we extensively debated one of the most essential issues for a medical organization: our position on our patients' right to die and our role as physicians in facilitating the process. The *End-of-Life Option Act (SB443/HB403)* would allow terminally ill and mentally capable adults to request a prescription from a physician to peacefully die. This bill resulted in a lively discussion in our MPS listserv with very well-articulated opinions in support and in opposition. The bill is especially interesting from the point of view of a psychiatrist. Many of us spend our professional time balancing risk for our patients who may want to hurt themselves, with the worst outcome undoubtedly being a completed suicide. While the title of the bill has morphed on several occasions (other names have been *Physician Assisted Suicide* or *Medical Aid in Dying*) and many guardrails have been added over the years, there is something contrary to our urge to save lives that continues to make the support of this bill a difficult decision.

Much of the controversy has to do with the fact that the physician becomes the conductor in assisting patients with terminal illness in dying. Most of our membership support and work to reduce human suffering every day, and many support the right of people to die with dignity. However, many also disagree with being an active agent in the death of patients, especially when the definition of terminal illness and psychiatric stability may not be well-established. In 2022, MPS

surveyed its members about this bill. A total of 176 members participated, or 23% of those emailed. The survey asked 3 main questions: 1- Do patients have the right to end their life in various situations? 2- Is it okay to prescribe medications in those situations? And 3- Is it okay to administer medications in those situations? There were varied views on the topic. While there was support for a right to die in principle, there was considerably less support for any physician role. The support was much lower when the question asked not about patients with *terminal illness*, but about those who want to *reduce suffering due to physical pain or severe deterioration*. Further, when asked about *psychological pain*, most of our members responded negatively to these questions about the right to elect to end life, and about physicians prescribing or administering medications with that goal. Additionally, when it came to minors, members mostly disagreed with parents requesting medical aid in dying for their children. There was overall agreement regarding safeguards like the need to train physicians who prescribe or administer lethal medications and the need for psychiatric evaluations. The many layers of this bill prompt fascinating conversations and are also cause for concern about what this bill would look like in reality. We can take a glimpse into this reality by watching Canada and several European countries where these types of bills have been in place for years.

Regardless of the differences in opinion, the group understood everyone was coming from a place of caring. We enjoyed a style of debate and civil discourse that seems rare in our society. In reality, if we actually regularly debated, we

Continued on next page

would find more commonalities than differences. According to the [Carnegie Endowment for International Peace](#), while politicians are ideologically polarized, Americans in general are not. But, while not *ideologically* polarized, we are indeed *emotionally* polarized, in that we dislike the other party's members and take opposing positions even when our personal opinions largely overlap. That is why one way to think about legislation is by ignoring who sponsors the bill, and asking ourselves instead: 1- what does the bill really say? 2- how will it impact our patients? 3- does it impact psychiatrists? It can be paralyzing at times, but the group discussions move the process along. We change our opinions with good arguments, until we arrive at the best possible agreed upon decision.

One thing that seems to distinguish physicians from politicians is the search for truth. I have yet to be in a conversation where one of us does not ask the question: "what do the data show?" Our role during this legislative session is to remind politicians about the evidence. This evidence also includes our personal experiences treating patients. Specific examples of why it is important for school coaches to receive mental health training, for insurance to cover annual behavioral visits, for the provision of sterile needles and first aid in locations for overdose and infectious disease prevention, and many other topics with potential broad impact are what politicians want to hear from us. MPS members can support the work MPS is doing and also testify individually for bills of their interest. [We plan to do that in Annapolis on February 1](#). More to come.

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

## Best Paper Awards Deadline February 15!

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 [April 18 MPS annual meeting](#).

**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 [April 18 MPS annual meeting](#).

**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 [April 18 MPS annual meeting](#).

Scholarly work of all kinds (e.g., scientific reports, reviews, case reports) will be considered. To nominate a paper and author, including your own, please email the paper to either of the co-chairs below by **February 15**. Please include a brief explanation of why 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 Deadline February 15!

The MPS poster competition for Resident-Fellow Members will be held again this year, with all entries displayed at the [April 18 MPS annual meeting](#)! 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 February 15**. Electronic copies of posters are due **February 20**. For more information, or to apply [please click here](#).

## 2024 MPS Dues Notices Members who have not yet paid 2024 dues are at risk of being dropped from both MPS and APA!

2024 MPS dues invoices have been sent since October via email and USPS. To pay your MPS dues:

- **NEW THIS YEAR! Pay via Zelle: 410-625-0232** This helps reduce credit card processing costs.
- Send your check to the **NEW!** MPS office (1211 Cathedral Street, Baltimore, MD 21201), which reduces our 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). [Payment plans](#) are available!

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

## Maryland Bills of Interest to MPS Members

The 445th session of the Maryland General Assembly convened in Annapolis on January 10 and will continue through April 8. As of the end of January, more than 1300 pieces of legislation have been filed. The MPS Legislative Committee has been hard at work since December (looking through pre-filed bills) screening bills, preparing testimony, etc. To date the committee has reviewed more than 50 bills. Several bills of interest are noted below. Members can stay up to date on the complete list of bills of interest by visiting the [MPS website](#). This page is updated every week throughout the session.

**Support:****[SB93/HB110 : Health Insurance Utilization Review](#)**

**Private Review Agents:** The goal of the bill is to require private review agents (PRAs) to use specific Utilization Review (UR) standards for MH and SUD authorization, medical necessity, and level of care decisions. State law already requires PRAs to use the American Society of Addiction Medicine (ASAM) Criteria for all UR decisions for SUD treatment, but it does not provide specific UR standards for MH care decisions. As a result, PRAs often use stringent criteria to deny the recommended level of care, particularly more complex and more expensive services. The bill would require UR agents to use medical necessity and placement criteria developed by the non-profit society of mental health professionals. If no such standards are in place, PRAs must adopt criteria that comply with "generally accepted standards of care," as defined in the bill. The bill would also require PRAs to speak with the prescribing provider before issuing a denial to identify the standard that has not been satisfied in an effort to avoid incorrect denials.

**[SB427: Public Health – Overdose and Infectious Disease Prevention Services Program](#)**

This bill would authorize community-based organizations to establish an Overdose and Infectious Disease Prevention Services Program to provide a location for consuming pre-obtained drugs, provide sterile needles, administer first aid, and certain other services. These organizations can play a critical role in overdose prevention. They are often well-positioned to provide harm reduction services and support to individuals who use drugs, including those at risk of overdose. Community-based organizations also provide a wide range of services related to overdose prevention.

**[SB124/HB400: Maryland Medical Assistance Program and Health Insurance - Annual Behavioral Health](#)**

**Wellness Visits - Coverage and Reimbursement:** An annual behavioral health wellness visit (ABHWV) is an appointment with a medical professional to assess and promote overall well-being. The visit may include a discussion of symptoms, stressors, mood, sleep patterns, substance use, and current life circumstances. The mental health professional may also provide education, coping strategies, and resources to improve mental health and prevent future issues. During the visit, the provider will likely

ask questions about the person's current emotional state, stress levels, and behavior patterns. This visit can help individuals identify potential mental health issues early on, allowing for prompt treatment and recovery.

**[SB165/HB375: Education – Coaches – Mental Health Training](#)**

Mental health first aid is a training program designed to help individuals identify, understand, and respond to someone who may be experiencing a mental health or substance use challenge. Since coaches have an important role in the lives of their athletes, and they can play a crucial role in helping them manage mental health challenges, coaches should be taught mental health first aid. By providing coaches with the knowledge and skills needed to identify and respond to mental health challenges, they can better support athletes and help them access the resources they need.

**Oppose:****[SB365/HB405: Family Law - Child Custody Evaluators - Qualifications and Training](#)**

Maryland Rule 9-205.3(d) establishes the qualifications framework for Maryland custody evaluators. As it relates to physicians, the Rule limits the types of physicians who can participate as custody evaluators to those "who [are] board-certified in psychiatry or ha[ve] completed a psychiatry residency accredited by the Accreditation Council for Graduate Medical Education or a successor to that Council[.]". The Rule also states that a psychiatrist or psychiatric resident must comply with the continuing education requirements of his/her field. A psychiatrist's and psychiatric resident's medical training, let alone continuing education, is rigorous and time-consuming. The additional educational mandate in this proposed attempt to codify Rule 9-205 is unnecessary. As it pertains to psychiatrists and psychiatric residents, an additional twenty (20) hours of continuing education for custody evaluators will only dissuade the already limited number of psychiatrists who act as custody evaluators from participating further.

**[SB449: Criminal Procedure – Incompetency to Stand Trial Dismissal](#)**

This bill aims to alter the time period after which a court is required to dismiss a certain charge against a defendant found incompetent to stand trial under certain circumstances; and authorizing a victim or victim's representative to petition the court to extend the time for dismissal of certain charges against a defendant found incompetent to stand trial. An alleged (but not proven) victim could petition to keep misdemeanor charges for up to ten years, and it is problematic to have seriously mentally ill defendants sitting in jail while waiting for a hospital bed.

## Court Decision in Gun Safety Education Case

In the [August 2023 issue](#), Dr. Vidal wrote about the MPS Council decision to sign on to an [amicus brief](#) in a case brought by Maryland Shall Issue against Anne Arundel County. Following the Capital Gazette shooting, the County Council unanimously passed an ordinance requiring that gun stores hand out information pamphlets about suicide risk factors and non-violent conflict resolution. On January 23, a 4<sup>th</sup> U.S. Circuit Court of Appeals panel [ruled](#) that the County requirement does not violate the First Amendment to the U.S. Constitution and that the requirement was a constitutional public health and safety advisory under U.S. Supreme Court precedent governing compelled commercial speech.

Anne Arundel County Executive Stuart Pittman [thanked the MPS](#) and others who joined in the effort to address gun violence on behalf of the county. For more information, see reporting by [Annapolis Patch](#) and [WYPR](#), among others.

## Prescriber Alert

The January 2 Maryland Medical Assistance Program General [Provider Update](#) includes a notice that Federal regulations require Medicaid to enroll all Ordering, Referring and Prescribing (ORP) practitioners as participating providers in order for Medicaid to reimburse for their ordered, referred, and prescribed services (42 CFR § 455.410). To comply with this requirement, Maryland Medicaid must deny any Fee-For-Service (FFS) pharmacy claim where the prescriber is not actively enrolled in Maryland Medicaid.

Implementation in 2024 will be-phased as follows:

- Effective January 3, 2024, Maryland Medicaid will deny pharmacy claims for non-behavioral health drug classes if the prescriber is not enrolled.
- Effective July 1, 2024, Maryland Medicaid will deny all pharmacy claims regardless of drug class if the prescriber is not enrolled.

**All practitioners—including medical trainees, interns, and unlicensed residents—who prescribe to Maryland Medicaid participants must be actively enrolled Medicaid providers for their prescriptions to be covered at the point-of-sale.** A licensed practitioner may enroll as either a fully participating (billing or rendering) provider, or an ORP-only Provider (does not bill for services or sign a full Provider Agreement). Unlicensed medical trainees must enroll as ORP only providers.

It is critical that practitioners who prescribe to Medicaid participants [enroll](#) ASAP to ensure that patients can receive Medicaid covered medications. Prescriber enrollment status can be checked via the [Provider Verification System](#). Updates and resources are available on MDH's [Ordering, Referring, and Prescribing \(ORP\) Providers](#) webpage.

## 2024 MPS Legislative Committee Priorities

- Scope of Practice
- Access to equitable and quality care
  - A. Telehealth protections and expansion
  - B. In-person workforce maintenance and growth
- Reimbursement Parity
- CoCM (Collaborative Care Model) – covered by Maryland Medicaid as of 10/1/23; but implementation needs input.
- Behavioral Health Administration priorities
  - A. Crisis systems reform
  - B. Involuntary commitment (i.e. outpatient civil commitment)
  - C. Bed registry
  - D. CoCM
- Prior Authorization
- Child and Adolescent Mental Health issues
- Gun safety legislation
- Emergency Petition process reform
- Physician Assisted Suicide (PAS) AKA Medical Aid in Dying (MAID)

## MPPAC Officers Needed

The Maryland Psychiatric Political Action Committee (MPPAC) is a separate organization whose officers are appointed by the Maryland Psychiatric Society (MPS) and the Suburban Maryland Psychiatric Society (SMPS). Contributions to the MPPAC fund state Delegates and Senators who are influential in mental health or who support treatment. MPS and SMPS are prohibited from contributing to political campaigns, so the MPPAC serves an essential purpose. MPPAC board members and contributors attend legislator fundraising events and meet with legislators in Annapolis to help educate elected officials and build rapport.

The MPPAC is looking for interested members to serve as Chair (starting in 2025) and as Secretary Treasurer (beginning ASAP). To express interest in either position or for more information about what the positions entail, please email [mflloyd@mdpsych.org](mailto:mflloyd@mdpsych.org).

## Action Needed: Medicaid E&M Rates

MedChi, MPS and other physician organizations have fought for Medicaid E&M rates to match that of Medicare. Over the last several years, Medicaid enrollment has increased significantly. Ensuring that payment rates are funded at no less than current levels will assist our state in recruiting and retaining physicians and other health care practitioners needed to ensure that patients have access to care. [Contact legislators today](#) to support this initiative.



## Supporting our Students: Navigating Mental Health Care Services on Today's College Campuses

A Joint MPS and MRCCAP Program  
Presentation by Sean Heffernan, M.D.

Thursday April 4  
7:00PM  
A Virtual CME Activity

**Agenda**  
7:00-8:30 Sean Heffernan, M.D.  
8:30-9:00 Q&A Session

**Free for MPS and MRCCAP Members**  
**\$25 for Non-Members**

For more information and registration

**CLICK HERE**

Thank you to our sponsors *The Maryland Foundation for Psychiatry, Inc.*  
and *The Maryland Regional Council of Child and Adolescent Psychiatry*

## MARYLAND PSYCHIATRIC SOCIETY ANNUAL DINNER

Join us as we celebrate our MPS achievements made this past year!

**FOGO DE CHÃO BALTIMORE**

**APRIL 18, 2024**

Help us turn over the gavel to Theodora Balis, M.D., incoming MPS President and welcome Ronald Means, M.D. as the MPS President-Elect and Tyler C. Hightower, M.D. as treasurer.

[CLICK HERE](#) for more information and to purchase tickets

# Maryland News

## Commission on BH Care Interim Report

The recently established Commission on Behavioral Health Care Treatment & Access met on December 18, 2023. Visit the [Maryland Department of Health's Commission on Behavioral Health Care Treatment and Access](#) site for more detailed workgroup reports and overall meeting details.

The **Geriatric Behavioral Health** workgroup discussed the need for additional healthcare facilities, workforce needs, and reimbursement for behavioral health services. They focused on the lack of resources for elderly individuals recently released from incarceration, addressing the need for further research in supporting those transitioning from incarceration and other institutional facilities such as hospitals and inpatient substance use disorder facilities. Additionally, they highlighted the difficulty geriatric patients have in seeking mental health assistance due to factors such as limited providers accepting Medicare, providers not having geriatric expertise, and the overall lack of support for older individuals.

The **Youth Behavioral Health, Individuals with Developmental Disabilities, and Individuals with Complex Behavioral Health** workgroup reviewed the efforts towards suicide prevention, 988 crisis support, mobile crisis teams, and new 1115 waiver opportunities. They discussed the need for support services for parents/guardians of youths with behavioral health needs and workforce concerns among youth. They discussed the importance of community-based treatment, wrap-around supports, and the expanded funding for community health workers that can benefit the youth I/DD patients and individuals with complex behavioral health.

The **Criminal Justice-Involved Behavioral Health** workgroup addressed the need for increased staffing and bed capacity for psychiatry hospitals, further capacity planning for Spring Grove Hospital Center, and additional review of recovery housing options. They discussed acquiring patient housing data and reviewing options for recovery housing, the need for additional housing, and addressing the needs of employees caring for individuals in adult psychiatric hospitals.

The **Behavioral Health Workforce Development, Infrastructure, Coordination, and Financing** workgroup looked at the utility of telehealth, what is provided and covered with essential health plans, how external events can impact the delivery of behavioral health services, and crisis stabilization resources. They also recommended diverting behavioral health patients from emergency departments through the Maryland Mental Health and Substance Use Disorder Registry and Referral System, and 2-1-1 and explored harm reduction strategies and ways to support consumers in evaluating behavioral health services.

To be added to the Commission email list, email [mdh.behavioralhealthcommission@maryland.gov](mailto:mdh.behavioralhealthcommission@maryland.gov).

## ePrescribing Required for CDS

The Maryland law requiring electronic prescribing of controlled dangerous substances (CDS) includes exceptions in addition to a waiver for prescribers under certain scenarios, including economic hardship, technological limitations, and other circumstances. The [Office of Controlled Substances Administration](#) offers calendar year waivers. **Please [click here](#) to request an electronic prescribing waiver.** To check whether your waiver has expired, please use the lookup tool available at <https://health.maryland.gov/ocsa/Pages/Online-Waiver-Verification.aspx>

## Governor Signs Executive Order

On January 3, Governor Moore signed an executive order establishing the [Longevity Ready Maryland Initiative](#), directing the Department of Aging to develop a plan to coordinate efforts across state agencies and other stakeholders to proactively address the range of needs arising from a growing older adult population. Among its charges, the plan must include recommendations to better support the behavioral health of older Marylanders.

## Medicaid Proposal for Reentry

Maryland Department of Health (MDH) intends to seek federal approval to offer targeted Medicaid services to certain incarcerated people who are soon to be released from a state-managed jail or prison. Eligible people experiencing incarceration will receive services up to 90 days prior to release that consist of case management, medication-assisted treatment, and a 30-day supply of prescribed medications upon release. This is an exciting opportunity to improve access to SUD and MH care for individuals in carceral settings.

A 30-day public comment period opened on January 12. The draft amendment application and more information for submitting comments are [available here](#). Send written comments to Laura Goodman, Office of Innovation, Research and Development Office of Health Care Financing via email to [mdh.healthchoicerenewal@maryland.gov](mailto:mdh.healthchoicerenewal@maryland.gov). **MDH will accept comments through February 12.**

A public hearing will discuss the content of the waiver amendment and solicit feedback from stakeholders. To make a public comment, either attend the meeting in-person or register via the link below. After registering, you will receive a confirmation email with information about joining the webinar.

### February 5 from 10:30 to 11:30 AM

In-Person: Marvin Thomas Room, East Columbia Branch of HC Library,  
6600 Cradlerock Way, Columbia, MD 21045  
Virtual: GoToWebinar Virtual Platform at <https://attendee.gotowebinar.com/register/330448759780462426>

# Maryland News

## Parity Reporting & Compliance Update

The Maryland Insurance Administration (MIA) issued an [interim report on carrier parity](#) in early December. It found widespread non-compliance, identified eight recommendations to improve enforcement of the law, and urged the General Assembly to act on its recommendations in the 2024 session. The Legal Action Center responded to the MIA's recommendations and drafted amendments to address most of them and align Maryland standards with federal law (and in anticipation of new federal parity regulations being issued in 2024).

The draft amendments would require:

- Annual compliance analysis and reporting rather than bi-annual;
- Carrier reporting on all information and data points that are identified in the federal regulations and use of reporting templates that conform to federal regulations and guidance rather than the old NAIC form;
- Carrier reporting on all factors and evidentiary standards even if they were adopted before enactment of the Parity Act;
- Carrier reporting on all non-quantitative treatment limitations (NQTLs) with MIA discretion on the number of NQTLs it would review annually, provided MIA meets certain conditions (outlined in the amendments);
- Additional enforcement tools and penalty authority: carriers would have the burden of proof for compliance on the reports and in any parity matter filed with the MIA by a consumer or provider;
  - Carriers would be in violation of the state parity law if it does not submit sufficient information to determine compliance;
  - MIA can impose penalties for failure to submit sufficient information to determine compliance, including \$1000/day in liquidated damages for every day that the carrier fails to submit requested information;
- MIA review and final determination on every parity matter filed even if the MIA does not have sufficient information from the carriers to conduct a full parity analysis.

## UM Grant Award

University of Maryland, School of Medicine will receive a \$29 million research award over four years from the National Institutes of Health to lead a multicenter trial that aims to improve health outcomes in people who inject opioid drugs and are hospitalized with infectious complications of their drug use. Faculty affiliated with the Institute of Virology and the Kahlert Institute for Addiction Medicine at UMSOM will be conducting the research.

## MHAMD 2024 Legislative Briefing

The [2024 Mental Health Association of MD Legislative Briefing and Reception](#) will be held **February 12** at 3 PM in Annapolis. This year's focus is children, youth, and families. Youth will share their experiences navigating Maryland's behavioral health system and state agency leaders will explain efforts to better coordinate the system of care. General Assembly members will discuss legislation impacting Marylanders' behavioral health. [2024 behavioral health awardees](#) and networking round out the event.

## Maryland Prescription Drug Affordability Updates

The [annual report](#) of the Maryland Prescription Drug Affordability Board (PDAB) discusses price trends and out-of-pocket costs. Because the cost review process remains under development, including the drafting of regulations necessary to implement the process, no cost reviews were completed by the PDAB in 2023. A [Maryland Matters article](#) covers the PDAB Executive Director's legislative briefing where he said they hope to have a preliminary list of drugs for cost analysis by the January meeting and a list of "unaffordable" drugs by the Fall. Please see information for the January 29 [PDAB meeting](#) for updates.

## Firearm Storage

Access to unsecured firearms can result in suicide, serious injury, or violence towards others. Review firearm storage practices, learn signs of a crisis, and educate others via the Maryland Department of Health [Firearm Safe Storage and Youth Suicide Prevention guides](#).

## New Governor's Office for Children

On January 18, Governor Moore issued an executive order establishing the [Governor's Office for Children](#). The order also reestablishes the Children's Cabinet, which is directed to develop an interagency strategy to increase access to services and programs that support children and families, including mental health and substance use care. The Governor's Office for Children will lead statewide efforts to build a comprehensive network of supports, programs, and services for children and their families to promote social and emotional well-being; reduce food insecurity; combat youth homelessness; expand access to health services; improve education outcomes and job readiness; expand access to good jobs; and increase economic opportunity in sustainable ways. This coordinated effort to support younger Marylanders has been a key priority for the Children's Behavioral Health Coalition, of which the MPS is a participating member.



## 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.

### Transfers into Maryland

Snehdeep Hanspal, M.D.

## Don't Miss CPD Guest Presenter!

All members are invited to attend the next meeting of the MPS Community Psychiatry & Diversity Coalition (CPD) to be held **Thursday February 15 at 6 PM** via zoom. One of the [CPD goals](#) is to "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." The latest such opportunity is a presentation by Muhammad Zeshan, M.D. titled "**Beyond Borders: Ushering in a New Era of Infant-Parent Mental Health in Rural Pakistan.**"

Dr. Zeshan is a Clinical Assistant Professor of Psychiatry at Rutgers New Jersey Medical School – Newark and a Board Certified Child and Adult Psychiatrist. He is the Immediate Past President of the Pakistani American Psychiatrist Association of North America (PAPANA) and is a Certified Master Parenting Coach and Certified Maxwell Leadership Coach.

Please email [jhritz@mdpsych.org](mailto:jhritz@mdpsych.org) with questions. [Click here](#) for the Zoom link.

## Maryland Foundation for Psychiatry Radio Ad

### Latest Spot Highlights Anxiety from Political News

The [Maryland Foundation for Psychiatry](#) is running radio ads that highlight feelings people experience during divisive political campaigns and events. Use [this link](#) to listen to the current spot. You can also browse and play [past radio spots](#) on a variety of topics. The Foundation is also running a click ad, Coping with the Mental Health Impact of the News, on the Baltimore Sun website that links to its site.

## PRMS Resources

Based on the frequency of this topic on their help line over the past year, the PRMS resolutions for 2024 involve terminating a treatment relationship with a patient. Once a treatment relationship has been established, the psychiatrist remains responsible for the patient's care until the relationship has ended. Click [here](#) for the resolutions and [here](#) for the PRMS termination resource.

## 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.  
Lisa Hovermale, 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.

## Member Publications

Drs. **Denis Antoine** (last author) and **Eric Strain** (co-author) published a paper in *Addiction Biology* titled "[Polymorphisms in the A118G SNP of the OPRM1 gene produce different experience of opioids: A human laboratory phenotype-genotype assessment](#)," studying the variation in people's response to opioids based on the genotype they carry in the mu-opioid receptor gene.

**Dave Gorelick** M.D., Ph.D.,'s published an article in *The New England Journal of Medicine* in December 2023. "[Cannabis-Related Disorders and Toxic Effects](#)" reviews [cannabis use and its effects, specifically on young adults](#). You can also view [his interview on Fox 45 News about his research here](#).

**Harsh K. Trivedi**, MD, MBA was Consulting Editor for "[Adolescent Cannabis Use](#)" published by Psychiatric Clinics of North America in December 2023. The publication addresses the effects of cannabis consumption on the adolescent population.

## Shoutout an MPS Member!

Last fall MPS leaders started a "Member Shoutout" recognition program where anyone can request that MPS publicize a member's accomplishment or good work, such as great clinical care for a particular patient, publication of research, etc. Members are encouraged to submit their own or others' activities for MPS publication to [meps@mdpsych.org](mailto:meps@mdpsych.org). Don't be modest! We want to celebrate all the rich contributions that our members are making to the profession.



## New DFAPA and FAPA Members

Congratulations to the following members who are newly approved Fellows and Distinguished Fellows:

### NEW Distinguished Fellows

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

Thomas Franklin M.D.  
Samson Gurmu M.D.  
Stephanie Knight M.D.  
Jessica Merkel-Keller M.D., MSc  
Paul Nestadt M.D.  
Vani Rao M.D.

### NEW Fellows

Adefolake Akinsanya M.D.  
Ameya Amritwar M.D., MBBS  
M. Haroon Burhanullah M.D.  
Emily Bomasang-Layno M.D.  
Zachary Cordner M.D., Ph.D.  
Bernadette Cullen MB, BCh, BAO  
Vedrana Hodzic M.D.  
Suni Jani M.D., MPH  
Nadimire Jules-Dole M.D.  
Surbhi Khanna M.D., MBBS  
Justine Larson M.D.  
Oscar Morales M.D.  
Matthew Peters M.D.  
Arachchige Pubudini Muthukuda M.D.  
Neal Ranen M.D.  
Coleen Schrepfer M.D.  
Alice Shin M.D.  
Mona Thapa M.D.

## Members Out & About

In December, **Robin Weiss, M.D.** participated as a panelist at a conference convened by the [National Academies of Science, Engineering, and Medicine](#) in Washington, DC, *Adult Attention-Deficit/Hyperactivity Disorder: Diagnosis, Treatment, and Implications for Drug Development -- A Workshop*. Her portion of the workshop focused on the stimulant shortage -- its cause, and its impact on clinicians and patients.

**Jill RachBeisel, M.D.** was recently interviewed by *Maryland Public TV* where she discussed the negative feelings, such as anxiety and depression, that many individuals feel during the holidays. During her segment, "[Coping with Holiday Depression & Anxiety](#)" she shares ways to improve mental health in the holiday season.

**Pamela Ramos, M.D.** published an article in *The Washington Post* on January 19 titled "[Weight-loss drugs are challenging for people with eating disorders.](#)" Dr. Ramos reviews ways to change how individuals can question the thinness myth and shares the impact weight loss drugs are having on those with eating disorders.

**Chad J. Lennon, M.D.** was featured on a Radio One livestream, "[B'More in 2024: Get Physically and Mentally Fit.](#)" In this first 2024 installment of the Minority Mental Health Forum, Dr. Lennon shared tips on how families can maintain mental and physical fitness throughout 2024.

## Member Spotlight

Congratulations to MPS member **Alden Littlewood, M.D.**, who will become a member of the State Board of Physicians! Governor Wes Moore appointed Littlewood on December 12, and she will soon take her oath of office to begin her term through July 2027.

## 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.

RESIDENTS AND FELLOWS

# TRIVIA NIGHT

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including  
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February 6

@6-9PM

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

## Updates to Open Payments Data

Manufacturers and group purchasing organizations submit Open Payments financial data to disclose their relationships with doctors and other healthcare providers. The [Open Payments](#) data has been updated with changes since June 2023. A new dataset is available at <https://openpaymentsdata.cms.gov/>. Open Payments is refreshed annually to reflect corrections since initial publication:

- **Record Updates** - Changes to non-disputed records completed by November 15, 2023.
- **Disputed Records** - Updates for dispute resolutions completed by December 31, 2023. Records with active disputes are displayed as such.
- **Record Deletions** - Records deleted before December 31, 2023, are removed. Records deleted after December 31 remain but will be removed in the June 2024 publication.

The data refresh does **not include** records submitted for the first time after March 31, 2023 or disputed records for which resolution resulted in a change to the covered recipient (who must have an opportunity to review their attributed data).

For more information, visit [www.cms.gov/openpayments](http://www.cms.gov/openpayments).

## NEDA Week

The National Eating Disorder Association (NEDA) is recognizing **February 26<sup>th</sup> through March 4<sup>th</sup> as National Eating Disorders Awareness Week**. NEDA's goal is to educate the public about eating disorders, spread positivity and hope to those with an eating disorder, and provide treatment to individuals. For resources and involvement opportunities, visit [NEDA](#).

## SAMHSA Celebrates 20th Prevention Day

SAMHSA Prevention Day is the largest federal annual national gathering dedicated to advancing the prevention of substance use and misuse. As part of the celebration, SAMHSA announced an update to the [Overdose Prevention and Response Toolkit](#). The updated toolkit provides guidance on opioid overdose reversal medications, addresses stimulant overdoses, and includes population-specific information.

Also, the [FentAlert Challenge](#), is open through February 26 offers adolescents age 14-18 the opportunity to creatively engage their peers about fentanyl and prevent risky behavior.

## Slate for March 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)  
Vacancy—email [mfloyd@mdpsych.org](mailto:mfloyd@mdpsych.org) if interested

**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.

## New Prior Authorization Regulation

The AMA applauds CMS for heeding patients and the physician community in a [final rule](#) that reforms government-regulated health plans' prior authorization programs for medical services. The final rule requires impacted plans to support an electronic prior authorization process that is embedded within physicians' electronic health records, bringing much-needed automation and efficiency to the current time-consuming, manual workflow. The rule will significantly enhance transparency around prior authorization by requiring specific denial reasons and public reporting of program metrics as well as requiring that prior authorization information be available to patients so they become more informed decision makers.

Through the [Recovery Plan for America's Physicians](#), the AMA works on prior authorization and other obstacles so physicians can focus on patient care.

## APA News & Information

### Addressing SUD in the Hispanic Community

On Thursday, **February 8 at 7 PM**, the APA's next "Looking Beyond Mental Health Equity Fireside Chat" will explore the independent and interactive effects of acculturation and sociocultural stress on alcohol initiation by Hispanic youth. [Click here](#) to register for Addressing Substance Use Disorder (SUD) in the Hispanic Community Unpacking Sociocultural Risk and Resilience.

### Diversity and Health Equity News

The APA's Fall 2023 [Diversity and Health Equity Newsletter](#) is available [here](#). In the [Mental Health Equity Champion](#) spotlight, Junji Takeshita, M.D. shares personal insights, from starting a geriatric psychiatry fellowship, to thoughts on intergenerational approaches that can improve the mental health and well-being of older adults and their families.

### Senior Psychiatrist Award Nominations

The [Senior Psychiatrist Berson Award](#) is given annually to a member who has contributed significantly to Psychiatry. The Award consists of an honorarium of \$1000 and a plaque. "Significant" contribution(s) is defined broadly as scientific or service contributions to the profession, the APA, or the Senior Psychiatrist organization. Additional details are [here](#). The submission deadline is **February 29<sup>th</sup>** and presentation will be at the APA Annual Meeting on the evening of May 7<sup>th</sup> in New York City.

### Join APA Speakers Bureau

To diversify and broaden the APA's bench of public-facing experts, it is seeking members who would like to join its Speaker's Bureau. In addition to traditional media requests, the APA has other opportunities available for members who are willing to share their expertise. Members of the Speaker's Bureau, as an internal influencer group, will also be asked to amplify APA's voice by promoting public education initiatives via blogs and social media, providing testimony and more. Please email [James Carty](#) for more information.

### APA Early Bird Rates End February 6

Join the APA **May 4 through May 8** for sessions, courses, and more at this year's annual meeting in **New York City**. [Register](#) ASAP for the lowest rates for the in-person experience.

### Assembly Representation on APA Councils Needed

APA Councils provide expertise in the development of APA policy and resources for members and the profession. [Councils](#) are authorized to act within an area of interest to implement the objectives of the APA (subject to Board approval). **Area 3 has identified gaps on the following Councils and would like to identify individuals willing to serve starting in May 2024.** Open Council positions include:

- Council on Children, Adolescents, and their Families
- Council on Consultation-Liaison Psychiatry
- Council on Geriatric Psychiatry
- Council on Healthcare Systems and Financing
- Council on Psychiatry and Law
- Council on Quality Care

If you are interested in representing Area 3 in the Assembly on one of these councils, please complete a short (2-minute) questionnaire: [forms.office.com/r/wkgVUgwhJq](https://forms.office.com/r/wkgVUgwhJq)

### Apply for 2023-24 Fellowships

The [APA/APAF Fellowships](#) application is open through **March 15**. 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.

### Support Behavioral Health Integration and Collaborative Care

Over 100 research studies and 51 organizations across the physician, employer, payer, mental health and patient spectrum support the Collaborative Care Model (CoCM), an evidence-based delivery of integrated behavioral and primary care that increases access to mental health and SUD services, patient outcomes and saves money. The APA supports bipartisan federal legislation to expand this model throughout the country. The Connecting Our Medical Providers with Links to Expand Tailored and Effective **(COMPLETE) Care Act (S.1378/H.R.5819)** incentivizes primary care to adopt behavioral health integration by increasing the Medicare payment for integrated care codes for 3 years and facilitates technical assistance to practices implementing CoCM. Please [click here](#) to send a message asking your federal representatives to cosponsor this important legislation.



## APA News & Information

### Nominees for RFM Deputy Representative

APA Area 3 is looking for strong candidates for the position of RFM Deputy Representative from Area 3 to the APA Assembly. This is an opportunity for a resident or fellow to learn how organized psychiatry works, represent their RFM colleagues, and contribute to the development of our field. Attendance at the November and May APA Assembly meetings as well as Spring and Summer Area 3 Council meetings is expected.

Candidates must be members of the APA and in good standing in an accredited Residency or Fellowship program. The Deputy Rep position is for a one-year term, but it is expected that the RFM Dep Rep will advance to RFM Representative the following year. Therefore, nominees must have at least two years remaining in residency/fellowship in [Area 3](#).

Interested candidates should submit the materials below by **February 18** to [mfloyd@mdpsych.org](mailto:mfloyd@mdpsych.org):

1. Letter of interest
2. Curriculum Vitae
3. Letter of recommendation from their Training Director

### 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.](#)

### “From Pages to Practice” Podcast

*Psychiatric Services* Editor Lisa Dixon, M.D., M.P.H., and Podcast Editor and co-host Josh Berezin, M.D., M.S., [discuss key aspects](#) of research recently published in *Psychiatric Services*. Topics include community-based treatment programs, collaborative care, evidence-based treatment and service delivery, criminal and social justice, policy analysis, and more. Discover more [APA podcasts](#).

### Expand Your MPS Engagement in 2024!

With the start of a new year, MPS members may be looking to get more from their membership in the Maryland Psychiatric Society. Consider trying the following offerings, all of which are easy to get started.

#### Join the MPS Listserv

Join the online MPS community to quickly and easily share information with other MPS psychiatrists who participate. To join, click [here](#). You will need to wait for membership approval and will be notified by email. If you have any problems, please email [mps@mdpsych.org](mailto:mps@mdpsych.org).

**MPS Interest Groups:** [Interest Groups](#) are a way to connect with other psychiatrists around areas of mutual interest. Most communication occurs over email, but other options are possible. MPS members can opt in indefinitely to receive information and the opportunity to share news, ideas and concerns with participating members. Be sure to check out our new Collaborative Care Model interest group!

#### Curbside Conversations Resource

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

#### Member Spotlight Opportunity

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

#### Enhance your Credentials

Apply for Fellow or Distinguished Fellow status later this year. Visit the [APA website](#) for details and a link to [apply](#).

#### Engage with Digital Options

To stay informed, visit the [MPS website](#) regularly and follow us on [Facebook](#), [Instagram](#), [X, formerly Twitter](#), and [LinkedIn](#).

Other possibilities coming next month include voting in the MPS election or serving on a [committee](#). Watch your email for details.



**SPREAD LOVE**



# Medicare Updates

## MIPS Reminders

**Data Submission:** 2023 Merit-based Incentive Payment System (MIPS) data is being accepted open through April 1. Be sure to sign in at the [Quality Payment Program site](#) to submit and review your 2023 data by the deadline.

**2024 Eligibility:** Check whether you're currently required to participate in MIPS by entering your 10-digit National Provider Identifier (NPI) into the [QPP Participation Status Tool](#). The participation threshold in 2024 remains:

- Bill more than \$90,000 a year for professional services under Medicare; AND
- Furnish services to more than 200 Medicare Part B beneficiaries; AND
- Provide more than 200 services under Medicare.

**2024 Payments:** Last year each participating clinician received a 2022 MIPS score that impacts their Medicare payment in 2024. A positive, neutral, or negative MIPS payment adjustment in 2024 applies if:

- Clinician type is included in MIPS;
- Enrolled in Medicare prior to January 1, 2022;
- **Were not** a Qualifying Alternative Payment Model (APM) Participant;
- Were a Partial Qualifying APM Participant that elected to participate in MIPS; **and**
- Met one of the following criteria:
  - Individually exceeded the low-volume threshold;
  - Practice exceeded the low-volume threshold at the group level and submitted group or APM data; or
  - Were part of an approved virtual group.

## CMS Finalizes Rule

To increase health data exchange and access to care, CMS is finalizing [the Interoperability and Prior Authorization](#) rule (CMS-0057-F). The rule sets requirements for Medicare Advantage organizations, Medicaid and the Children's Health Insurance Program (CHIP) fee-for-service programs, Medicaid managed care plans, CHIP managed care entities, and issuers of Qualified Health Plans offered on the Federally-Facilitated Exchanges, (collectively "impacted payers"), to improve the electronic exchange of health information and prior authorization processes for medical items and services. These policies will improve prior authorization processes and reduce burdens on patients, providers, and payers, saving approximately \$15 billion over ten years. For more information please see this [Fact Sheet](#).

## 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 are also available using the tool.

## CMS Announces New Model

CMS announced a new model to test approaches for addressing behavioral and physical health, as well as health-related social needs, of people with Medicaid and Medicare. The Innovation in Behavioral Health Model's goal is to improve the overall quality of care and outcomes for adults with mental health conditions and/or substance use disorder by connecting them with the physical, behavioral, and social supports needed to manage their care. The model will also promote health information technology capacity building through infrastructure payments and other activities. The model will launch in Fall 2024 and is anticipated to operate for eight years in up to eight states. CMS will release a Notice of Funding Opportunity for the model this spring. For more information [please click here](#).

# ANNOUNCING 2024 Package Options

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**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](mailto:Dr. Mike Boyle) 410-206-6070 or 410-465-2500.

### 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](mailto:Robert.Wisner-Carlson@ctphc.org), Clinical Director, at 410-724-3075. Applications can be placed on the [State of Maryland JobAps](https://www.maryland.gov/jobaps/), noting Howard County work location.

## Adult, Child & Addiction Psychiatry

The Mid-Atlantic Permanente Medical Group (MAPMG) proudly provides the highest quality integrated care for over 800,000 members in Virginia, Maryland, and the District of Columbia. In collaboration with the Kaiser Foundation Health Plan of the Mid-Atlantic States we provide high-quality, patient-centered health care.



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## Medical Director

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## Inpatient Psychiatrist

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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

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