

MPS NEWS

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Editor: Meagan Floyd

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Deadline for articles is the 15th of the month preceding publication. Please email jhritz@mdpsych.org.
MPS News Design & Layout
Jora Hritz

President's Column

APA's New Strategic Plan

In the past months, APA undertook the task of updating the [vision, mission and principles](#) of the organization and creating a new strategic plan. The new mission statement is "to champion psychiatrists' medical leadership in advancing mental health and delivering high-quality care to improve patients' lives." The strategic plan rests on three pillars:

- Medical Leadership - Lead the future of patient-centered, evidence-driven, science-backed mental health care by defining clinical standards and shaping emerging care models.
- Member Success - Support psychiatrists across all career stages and practice settings with practical resources, innovative education, and meaningful connections that build belonging and fulfillment.
- Organizational Strength - Build an aligned OneAPA culture that drives innovation, modernizes governance, and ensures financial sustainability.

Some might view this plan as a narrower approach than past strategies that included broad public policy initiatives. It also seems likely that this refined vision in part reflects the direction of the APA that was highlighted in the [fall issue](#) of the Maryland Psychiatrist. As noted in that article, to balance the desires of the membership, protect the financial integrity of the organization and fight against misinformation or policies that will weaken the field of psychiatry or affect psychiatric patients, the APA has decided to advocate strongly about scientific matters while avoiding activist stances on social issues.

The practical, administrative part of my mind appreciates this approach. The APA is a professional, physician organization that, at its core, should be focused on advancing science and supporting members in their capacity to practice. The impassioned clinician within me wants for more, hoping to see an organization that fights to create systems of care in which even the most disenfranchised can access the highest quality treatment.

To discuss this balance, my [interview this month is with Steven Sharfstein](#). As many of you know, Dr. Sharfstein was the President and CEO of Sheppard Pratt for nearly 25 years and served as the APA president in 2005. Dr. Sharfstein gives great historical insight into the organization, having been closely involved for so many years. He explains the importance of the new strategic plan, especially during times of financial strain at the APA, but he also discusses some reservations with the approach. In addition, Dr. Sharfstein will discuss his work with the [Committee to Protect Public Mental Health](#).

Looking forward to a great start to the new year and continued work with each of you!

Ronald Means, M.D.
MPS President

The MPS Council will meet via Zoom on January 13 at 7:30 PM. All members welcome!

Join the Maryland Psychiatric Society's [Community Psychiatry & Diversity Coalition's](#) January meeting to hear from Dr. Steven Sharfstein and Dr. Robin Weiss regarding the Committee to Protect Public Mental Health. Please email jhritz@mdpsych.org for more information.

2026 MPS Dues Notices

The 2026 MPS dues invoices were emailed the first week of October and have been sent via USPS.

To pay your MPS dues:

- Send your check to the MPS office (1211 Cathedral Street, Baltimore, MD 21201), which reduces our credit card processing costs.
- Pay via Zelle: 410-625-0232 which also helps to reduce credit card processing costs. (See QR code on this page.)
- You can also pay dues via credit or debit card or PayPal at www.mdpsych.org (Select "Contact" and scroll to the "Pay Now" button).

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

Ikwunga Wonodi Award Application Now Open!

The [Ikwunga Wonodi Social Justice and Health Equity in Psychiatry Award](#) is now open for application submissions. The Wonodi Award honors a Resident, Fellow, or Early-Career Psychiatrist who has demonstrated distinction in advocating for human rights and equity in psychiatric care for people with severe mental illness from historically marginalized and underserved communities through teaching, research, clinical work, and/or public health advocacy. For more information on the award and application guidelines, [click here](#) or [visit the MPS website](#). The deadline to apply is February 12, 2026. A winner will be announced prior to the Annual Meeting in April 2026. Any questions can be directed to jhritz@mdpsych.org.

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 2026! 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. Dinner ticket funding courtesy of the Maryland Foundation for Psychiatry.

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.**

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 2025 Paper of the Year Award in three categories:

Best Paper by an Early Career Psychiatrist Member (ECP):

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

Best Paper by a Medical Student Member (MSM):

Eligible psychiatrists are ECP, RFM, and MSM members who are first authors of papers published or in press in 2025. The winners of each category will receive a **\$200 cash prize** as well as a complimentary ticket to the MPS annual dinner in April 2026. Dinner ticket funding courtesy of the Maryland Foundation for Psychiatry.

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

Traci Speed, M.D., Ph.D. speed@jhmi.edu

Academic Psychiatry Committee Co-Chairs

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, 2024 to January 9, 2025. 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 by **January 9, 2026.**

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

Thank You!

The following members paid additional MPS dues for 2026.
We appreciate your support of the Maryland Psychiatric Society!

Joanna Brandt, M.D.
Lisa Hovermale, M.D.
Jill Joyce, M.D.
Thomas Allen, M.D.
Virginia Ashley, M.D.
Mark Ehrenreich, M.D.
Jemima Kankam, M.D.

New DFAPA and FAPA Members

The following MPS members have been announced as newly approved Fellows and Distinguished Fellows:

NEW Distinguished Fellows

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

John Campo, M.D.
Mary Cutler, M.D.
David Goodman, M.D.
Enrique Oviedo, M.D.
Todd Peters, M.D.
Rachna Raisinghani, M.D.

NEW Fellows

Somya Abubucker, M.D.
Shawn Hossain, D.O.
Alden Littlewood, M.D.
Brandon Newsome, M.D.
Chiedozie Ojimba, M.D.

MPS ADVOCACY DAY IN ANNAPOLIS

On February 18 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. MPS lobbyists help with talking points and protocol. Contact Meagan Floyd via text (410-625-0232) or [email](#).

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.

New Member

Ingrid Orinda, M.D.

Transfer

Somya Abubucker, M.D.
Clio Franklin, M.D.

Member Publications

Paul Nestadt, M.D. co-authored an op-ed in The Hill titled "[How to partner AI with human compassion in suicide prevention](#)." The article acknowledges the accessibility of AI chatbots while emphasizing the need for stronger collaboration between technology companies, clinicians, and researchers to maintain safety in mental health care through AI.

Dina Sokal, M.D. released her new collection of short stories, [After the Rain](#). The book weaves together narratives of individuals navigating the heaviest downpours of life, only to find unexpected sources of light and healing. The book is available for purchase [here](#).

Out & About

Sarah Edwards, D.O. was quoted in a *Psychiatry Online* article, "[Joy and Sadness Exist Together in 'A Charlie Brown Christmas'](#)." The article discusses how the Christmas special was one of the first to depict mental health issues in youth, especially framed around the holidays. Dr. Edwards said that "The story normalized different emotional themes such as loneliness and searching for meaning without pathologizing it."



Southern Psychiatric Association &
Maryland Psychiatric Society
Annual Conference

September 16 – 19, 2026

Royal Sonesta Harbor Court Hotel, Baltimore, MD



2026 State of Psychiatry in Maryland

January 28, 2026 6:00PM UNTIL 9:00PM

PANEL DISCUSSION FROM 7:00PM - 8:30PM LED BY MPS PRESIDENT, RONALD MEANS, MD
@ THE CONFERENCE CENTER AT SHEPPARD PRATT

**2 CME
Credits**



Rishi Gautam, MD
Chair of Psychiatry,
LifeBridge Health



James Potash, MD, MPH
Psychiatrist-in-Chief,
Johns Hopkins Medicine



Jill RachBeisel, MD
Dept. of Psychiatry Chair,
University of Maryland
School of Medicine



Elias Shaya, MD, DLFAPA
Regional Medical Director,
Behavioral Health -
MedStar North



Harsh K. Trivedi, MD, MBA
President and CEO,
Sheppard Pratt

Learn from some of the leading behavioral health experts in the state of Maryland who will address challenges and successes with delivery of behavioral health services in the current financial and political environment.

\$20 Entry Fee

All Residents and Fellows can attend for free
LIGHT REFRESHMENTS WILL BE PROVIDED

REGISTER HERE

Contact: jhritz@mdpsych.org

Accreditation and Designation Statement

In support of improving patient care, this activity has been planned and implemented by American Psychiatric Association (APA) and The Maryland Psychiatric Society (MPS). APA is jointly accredited by the American Council for Continuing Medical Education (ACCME), the Accreditation Council for Pharmacy Education (ACPE), and the American Nurses Credentialing Center (ANCC), to provide continuing education for the healthcare team.

The APA designates this live activity for a maximum of 2 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

MARYLAND PSYCHIATRIC SOCIETY

TRIVIA NIGHT

MARCH 3, 2026

6:00PM - 9:00PM

@HOMESLICE MT VERNON

FREE FOR ALL MARYLAND PSYCHIATRIC
RESIDENTS AND FELLOWS

**CASH
PRIZES**

\$200

1st Place
Team

\$100

2nd Place
Team

\$50

3rd Place
Team

FOOD

**OPEN
BAR**

REGISTER HERE

THANK YOU TO OUR EXHIBITORS



YOU MAY RESERVE UP TO 2 TICKETS

Maryland News

CBHC 2026 Policy Agenda

The need for quality mental health and substance use care that addresses the unique needs of young Marylanders has never been greater. More than 36% of Maryland high school students report feeling persistently sad or hopeless, and 18% of high schoolers and 24% of middle schoolers have seriously considered suicide. According to a 2025 report from Mental Health America, Maryland's percentage of serious suicidal ideation among youth aged 12-17 is 5th highest in the nation. The Children's Behavioral Health Coalition will advocate for a range of solutions to address Maryland's youth mental health crisis.

INFANT AND EARLY CHILDHOOD MENTAL HEALTH

Maryland should:

- Implement recommendations from the Behavioral Health Advisory Council and the Commission on Behavioral Health Care Treatment and Access regarding the screening, diagnosis, and treatment of very young children
- Improve Maryland's 1915(i) program for youth with intensive behavioral health needs by including services appropriate for families of children aged 0-5
- Restore technical assistance funding that supports the Maryland State Department of Education's IECMH Support Services program

SCHOOL BEHAVIORAL HEALTH

We must ensure continued, stable funding for the Consortium and these critical school behavioral health resources in FY27.

MATERNAL MENTAL HEALTH

Maryland should adopt recommendations from the state's Task Force to Study Maternal Mental Health that are designed to expand access to information and resources for mothers and families at various times during the perinatal period, improve screening for PMADs, and enhance maternal mental health training for maternity care providers and pediatricians.

INSURANCE PARITY

The Maryland Insurance Administration should increase penalties for insurance companies that violate state and federal parity laws.

JUVENILE JUSTICE DIVERSION

CBHC will support efforts to expand YSBs and other prevention and early intervention services for youth involved with or at-risk of involvement with the Department of Juvenile Services and work to prevent further criminalization of youth with behavioral health needs.

YOUTH CRISIS RESPONSE

As identified in the Behavioral Health Administration's 2025 Roadmap to Strengthen Maryland's Public Behavioral Health System for Children, Youth and Families Maryland should integrate the full scope of the youth-specific Mobile Response and Stabilization Services (MRSS) model into every jurisdiction's crisis response system and ensure that youth and families are aware of crisis services and know how to access them.

PEDIATRIC HOSPITAL OVERSTAYS AND FOSTER YOUTH

CBHC will review and look to support the recommendations of this workgroup.

VOLUNTARY PLACEMENT AGREEMENTS

Per the BHA Roadmap the state should formalize an interagency process, establish a timeline for action, engage stakeholders, completely revise the VPA process, and transfer some functions from DHS to the Maryland Department of Health within the next year.

Key General Assembly Dates

The Maryland General Assembly will convene at noon on January 14. Several key dates of interest include:

- January 21: Final date for Governor to introduce budget bill and capital budget bill
- February 9: Any Senate bills introduced after this date will be referred to the Senate Rules Committee
- February 13: Any House bills introduced after this date will be referred to the House Rules and Executive Nominations Committee
- March 23: Opposite Chamber Bill Crossover Date - Each Chamber must send to other Chamber those bills it intends to pass favorably Opposite Chamber bills received after this date subject to referral to Rules Committees
- April 6: Budget bill to be passed by both Chambers
- April 13: Adjournment "Sine Die"

Keep the Door Open Rally

On February 26 at noon, hundreds of people will rally on Lawyer's Mall in front of the State House in Annapolis to stand up for the more than 1 million Marylanders who live with a mental health or substance use disorder and urge the General Assembly to provide adequate funding for critical mental health and substance use care. RSVP [here](#).

Maryland News

Maryland BHC 2026 Policy Agenda

The Maryland Behavioral Health Coalition is working to build a modern, integrated, person-centered and outcomes-driven behavioral health system of care that ensures equitable access to quality mental health and substance use treatment and support for every Marylander when and where needed. Core components and elements of this system are outlined below, as are the incremental, budget-conscious steps Maryland can take this year to further this vision.

Access and Funding

- Minimize the negative impact of federal Medicaid reforms by automating burdensome new administrative processes, broadly defining behavioral health-related work requirement exemptions, and preserving access to care for immigrant communities
- Increase penalties on health insurance companies that are found to be in violation of behavioral health parity laws
- Ensure adequate resources for public behavioral health care by increasing funding for community mental health and substance use care and by preventing dedicated behavioral health funding streams like Maryland's Opioid Restitution Fund (ORF) from being used to backfill other budget shortfalls

Primary, Specialty, and Emergency Behavioral Health Care

- Eliminate co-pays for CoCM-related services
- Prioritize uptake of CoCM in the AHEAD model
- Support continued CCBHC planning efforts and the forthcoming application for participation in the CCBHC Demonstration Program; ensure adequate funding in FY27 for Maryland's CCBHC Demonstration
- Increase resources at the BHA for oversight approaches that differentiate and support quality of care, such as value based purchasing, measurement based care, and gold card authorization policies
- Require the Commission on Behavioral Health Care Treatment and Access to study and make recommendations to ensure Maryland's crisis response system is adequately resourced

Behavioral Health Workforce

Promote the timely and effective licensing and certification of behavioral health professionals and paraprofessionals by modernizing application processes, increasing board funding and resources, eliminating discrimination in testing, and allowing for short-term temporary licensing

Public Health and Population-Based Priorities

- Improve infant and early childhood mental health, expand access to perinatal mental health services, and

reduce pediatric hospital overstays

- Increase community-based behavioral health long-term care options, make mental health peer support Medicaid-reimbursable, and ensure Maryland's Area Agencies on Aging (AAA) are adequately resourced
- Ensure Maryland's new Assisted Outpatient Treatment program is recovery-oriented, outcomes-focused, and protective of legal and civil rights afforded to all Maryland citizens
- Efforts to preserve and support the continued expansion of the state's Assistance in Community Integration Services (ACIS) program to increase housing stability and improve health outcomes for Marylanders at risk of institutional placement or homelessness
- Efforts to preserve and support the continued expansion of Maryland Medicaid's reentry program

The Maryland Behavioral Health Coalition is a diverse mix of nonprofit organizations working together to ensure all Marylanders have equitable access to high quality, culturally and linguistically competent, outcomes-oriented, patient-centered mental health and substance use care that promotes recovery and resiliency. Our member organizations represent Maryland consumers, family members, peers, service providers, behavioral health professionals, hospitals, health systems and more.

New Maryland Laws Taking Effect Jan 1

Faster Pediatric Hospital Transfers

Children transferred from one hospital to a specialized pediatric facility will no longer be subject to insurance prior authorization requirements under [House Bill 1301](#). The law applies when a licensed physician determines a transfer is medically necessary, ensuring that insurance reviews do not delay time-sensitive pediatric care, including intensive and specialty treatment.

Expanded Access To Out-of-Network Specialists

Patients seeking care from out-of-network specialists will receive additional protections under [House Bill 11](#) and [Senate Bill 902](#). The law requires insurers to treat certain out-of-network services as in-network when an appropriate specialist is not reasonably available within the insurer's network, limiting higher cost-sharing for patients and expanding access to specialty care.

Maryland News

MIA 2025 NQTL/Parity Report

Last month, the Maryland Insurance Administration (MIA) submitted its [final NQTL/parity compliance report](#) on December 1. This report was completed pursuant to legislation this coalition prioritized in 2020 and 2024.

While MIA notes “encouraging signs that carriers are improving in some respects,” the agency did identify numerous instances where carriers did not demonstrate compliance with the Mental Health Parity and Addiction Equity Act (MHPAEA), including in areas related to provider directories, provider reimbursements, and addressing providers shortages.

Among other recommendations, the agency suggests continuing the current biennial NQTL reporting schedule.

Maryland Rural Health Strategic Plan Summary

The Maryland Rural Health Strategic Plan is purposefully designed to equip state and local entities with a tailorable path toward a future in which all rural Maryland residents can reach their full health potential. The Strategic Plan puts forth three key priorities for organizations and programs to consider as they work to provide health services across rural Maryland. These priorities aim to strengthen multi-sector collaboration, advance health equity, and foster a more resilient rural health system. By integrating various dimensions of health, the current Strategic Plan encompasses objectives for improving access to care, resources, and opportunities for rural Marylanders to improve health outcomes. [Please click here](#) to read the summary, or to view the entire report.

Maryland Medicaid Moratoria Notice

MDH announced an additional six-month pause for certain behavioral health provider enrollments. This extension impacts 10 jurisdictions and four provider types. [Read the press release](#) or [Medicaid transmittal](#) to learn more.

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 or text 410-625-0232.

APA News & Information

Summary of APA December BOT Meeting

Report of the CEO and Medical Director - Dr. Marketa Wills, CEO and Medical Director, provided the Board with a comprehensive written report of the Association’s activities from October – December. At the meeting she discussed a few topics: Voice of the Member, administration highlights, and an update on the 2025 foundational goals, that also included a discussion on the current governance structure.

Voice of the Member - The Board received an early update from the new Membership Experience Annual Survey. Overall satisfaction with national APA membership averages 5.08 on a 7-point scale, with 69% of members rating their satisfaction 5-7. Satisfaction is higher among members engaged in APA leadership or volunteer roles. Early Career Psychiatrists represent a key opportunity area, with 55% reporting satisfaction compared with 71% of General & Life Members. Since 2022, overall satisfaction has increased across all segments, rising by 12 percentage points. Members identified near-term practice concerns including prescribing by non-medically trained providers, health systems hiring lower-cost, less-trained providers, access to care, workforce shortages, and reimbursement challenges. The survey also highlighted an important strategic tension: 52% of members prioritize prescribing and scope-of-practice issues, while 32% prioritize access and workforce shortages, yet only 13% prioritize both—underscoring the need for APA to address safe prescribing and access to care concurrently, informing planned medical leadership work in 2026.

Governance - The Board and Administration discussed whether and how the current APA governance structure supports the organization’s mission, and identified modern governance best practices, as well as areas where current practices differ from those standards. The discussion recognized that no single governance model is perfect and that the organization must find an approach that fits its history, membership, and strategic direction. The Board agreed that while no immediate decisions will be made, there is broad recognition that aspects of the current model feel “broken” in different ways, particularly the misalignment between mission and governance, the complexity and overlap of councils and committees, and the lengthy, sometimes inefficient action paper process.

Learning Session: Race for Relevance - During the learning session, the Board and staff reflected on Race for Relevance, a book on modernizing associations, and discussed what they learned and how its ideas might apply to the association. The Board highlighted the need to concentrate on the programs that deliver the greatest value,

Continued on next page

APA News & Information

December BOT Meeting Cont.

invest more intentionally in technology (including a more modern digital presence and DSM experience), and foster strong trust and alignment between leadership, staff, and members. No formal decisions were made; instead, the learning session provided a structured opportunity to examine the book's themes collectively and to thoughtfully consider how APA can continue to evolve in ways that strengthen its relevance, responsiveness, and impact in supporting psychiatrists, patients, and the profession.

Report of the Treasurer - Dr. Steve Koh provided a financial report as of October 31, 2025. The total forecasted revenue of \$57.8 million is \$0.4 million below the full year budget of \$58.2 million, mainly due to lower attendance than expected at the annual meeting. Additionally, Dr. Koh reviewed the investment portfolio through October 31, 2025. The investment portfolio returns were +13.8% of the net fees, which continue to perform well and is in line with the investment portfolio policy. Dr. Koh summarized the guidance provided by the Finance and Budget Committee provided to the Administration for development of the proposed 2026 budget. The proposed budget includes \$2.8 million in reserve funding for 2026, which is below the \$5.2 million maximum permitted under the Reserve Spending Policy. In addition, the Administration presented a \$0.96 million package of proposed strategic initiatives for Board consideration, as well as a capital expenditure budget. The Board approved the methodology presented and voted to approve the proposed 2026 budget, including \$1.9 million in contingency funding from reserves to support the SAMHSA fellowship program should external funding be discontinued. The Board also approved the proposed strategic initiatives and capital expenditures.

Warren Williams Assembly Speaker's Award

The Warren Williams Assembly Speaker's Award—established in 1984 in honor and memory of Warren Williams, M.D., Past Speaker of the Assembly (1972–1973)—recognizes recent or current outstanding activities or contributions in the field of psychiatry and mental health. The APA Area Councils have wide discretion in selecting people or programs to recognize for outstanding contributions to the field of psychiatry and mental health. Awards have been made to state and federal legislators, judges, reporters, journalists, and psychiatrists who have made significant contributions to their region, APA, and/or the field of psychiatry. A number of worthwhile programs have been recognized and funds were donated to their support, e.g., programs for the homeless, the chronically mentally ill, community support programs, and education and research activities. Nominations are now open. [Please click here](#) for more information.

Vote in APA Elections

The APA Nominating Committee, chaired by Dr. Ramaswamy Viswanathan, reports the following slate of candidates (in alphabetical order) for the [2026 Election](#). For more information, email election@psych.org.

All candidates for the [APA National Election](#) must be currently active voting members of the APA. Voting members of the APA are of the following member classifications: Resident-Fellow Member, General Member, Fellow, Distinguished Fellow, Distinguished Life Fellow, Life Fellow and Life Member. Medical Students and International Members are not eligible to run for national office.

President-Elect

- [Rahn Bailey, M.D.](#)
- [Steve Koh, M.D., M.P.H., M.B.A.](#)

Treasurer

- [Melissa Deuter, M.D.](#)
- [Gia Merlo, M.D., M.B.A., M.Ed.](#)

Trustee-at-Large

- [Vincenzo Di Nicola, M.Phil., M.D., Ph.D.](#)
- [Rajesh Tampi, M.D., M.S.](#)

Resident-Fellow Member Trustee-Elect (RFMTE)

- [David Marulanda, M.D.](#)
- [Meghana Sankaran, D.O.](#)
- [Karthik V. Sarma, M.D., Ph.D.](#)

Nominations for Area 3 Council Positions

Several positions are open for Area 3 Council positions. Application materials for each position include: Letter of interest, CV (maximum 3 pages), and up to 3 letters of recommendation. RFM positions require one letter from the residency/fellowship training director. All terms begin May 2026.

Open Positions:

- Representative, Area 3 Council – Dr. Dunlap seeks a second term (2-year term)
- Deputy Representative, Area 3 Council – Dr. Albaugh seeks a second term (2-year term)
- ECP Deputy Representative – Deputy Representative advances to Representative position (2-year term)
- RFM Deputy Representative – Deputy Representative advances to Representative position (1-year term)

Please send information **by January 9th** to Elections/Procedures Co-chairs [Eindra Khin Khin, MD](#) and [Kendrick Abad, DO](#).

APA News & Information

Apply for 2025-26 APA Fellowships

The [APA/APAF Fellowships](#) application is open through March 17, 2026. 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.

[Fellowships](#) include:

- APA/APAF Leadership
- Child and Adolescent Psychiatry
- Community Diversity
- Diversity Leadership
- Edwin Valdiserri Correctional Psychiatry
- Jeanne Spurlock Congressional
- Public Psychiatry
- Psychiatric Research
- SAMHSA Minority

Register Today for the 2026 Annual Meeting

APA's Annual Meeting is returning to **San Francisco, May 16-20**, bringing together psychiatrists, psychologists, nurses, social workers, and allied professionals for 4.5 days of collaboration and clinical growth.

With **400+ sessions** across **40+ topic areas**, attendees have an array of opportunities to earn CME or CE credits while connecting with colleagues who bring diverse perspectives to mental health practice.

Expect new experiences such as the **Biological Sciences Hub**, returning favorites like the **Community Psychiatry Hub**, and relevant educational sessions like these AM25 highlights:

- [ADHD Across the Lifespan](#)
- [New Vistas in Treatment of Mood and Anxiety Disorders](#)
- [Sleep: From Childhood to Aging](#)

Register today to be part of the conversations that connect disciplines and **save up to 25% when you register by December 17.**

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.](#)

Public Comment: DSM Eating Disorder Severity Specifiers

The DSM Steering Committee is seeking feedback on proposed revisions to severity levels for Anorexia Nervosa, Bulimia Nervosa, and Binge-Eating Disorder. The changes emphasize symptom severity, functional impairment, and medical complications rather than BMI levels or episode counts. Comment period ends January 8th, 2026. [Click here](#) for more information.

White House Releases Executive Order on AI Regulation

Last month, the White House released a long-anticipated [executive order](#) (EO) on artificial intelligence (AI) policy and regulation. The EO seeks to limit the ability of state lawmakers to regulate AI technologies in favor of a minimally burdensome national policy framework for AI regulation. The EO directs administration officials to engage in several efforts to challenge or otherwise discourage state action on AI regulation. Included among the directives is an effort to evaluate existing state laws for conflict with administration policy on AI, the creation of an AI Litigation Task Force tasked with challenging state AI laws, and a restriction of federal funding to states with onerous AI laws. The EO takes a particular interest in state laws that may result in AI developers or deployers "altering" truthful outputs of AI models to meet a state's prohibition on algorithmic discrimination, which the White House has deemed unfair and deceptive acts or practices. Finally, the EO directs preparation of draft legislation to establish a uniform federal policy framework that preempts state laws. Such language must preserve state authority related to child safety protections, AI compute and data infrastructure, state government procurement and use of AI, and other topics to be determined.

Psychiatrists with Immediate Patient Openings Available

The MPS maintains a list of members who can see new patients quickly. An *updated* "[MPS Members Actively Taking New Patients: Appointments Within 1-2 Weeks](#)" will appear on <https://mdpsych.org/> later this month. Please email mfloyd@mdpsych.org to be included (include name, patient types, insurances accepted, phone number/email, etc.) and/or consider referring patients to this resource. Patients can also try [Find a Psychiatrist](#), but the wait time may be longer.

Medicare Updates

Check Final 2025 MIPS Eligibility Status

Enter your 10-digit National Provider Identifier (NPI) in the [Quality Payment Program \(QPP\) Participation Status Tool](#) and review your final 2025 eligibility status for the Merit-based Incentive Payment System (MIPS).

Eligibility status based on a review of 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, 2024 – September 30, 2025).

- This status is final unless you participate in an [Advanced Alternative Payment Model \(APM\)](#) and your Qualifying APM Participant (QP) status changes as a result of the third APM Snapshot for the 2025 performance year.
- Results from the third APM Snapshot will also be available in December 2025 and will be announced through the QPP listserv.
- NOTE: We're updating results for the rural special status in the next few weeks based on the most recent Federal Office of Rural Health Policy (FORHP) Eligible ZIP code file available. Please check back at the end of December to confirm whether you have the rural special status for 2025.

Clinicians and groups that aren't eligible for MIPS can still choose to report data via [traditional MIPS](#).

Clinicians and groups who are identified as "opt-in eligible" on the [QPP Participation Status Tool](#) and want to report data can:

- Elect to Opt-in to MIPS. You'll receive a MIPS payment adjustment (positive, negative, or neutral).
- Elect to Voluntarily Report. You won't receive a MIPS payment adjustment.

Once made, your election is binding and irreversible. If you don't want to report, you don't have to make an election. Opt-in eligible clinicians and groups aren't required to participate.

Medicare 2026 Fee Schedule

The [2026 fee schedule](#) is now available for download in PDF, Excel and TXT formats in their [online tool](#). Individual code lookups will be available beginning January 5, 2026.

2023 QPP Performance Information Has Been Released

The Centers for Medicare & Medicaid Services (CMS) has added calendar year (CY) 2023 Quality Payment Program (QPP) performance information for clinicians, groups, virtual groups, and Accountable Care Organizations (ACOs) in the [Provider Data Catalog \(PDC\)](#) and on clinician and group profile pages in the Medicare.gov [compare tool](#). CMS is required to report the final scores and performances of Merit-based Incentive Payment System (MIPS)-eligible clinicians under each MIPS performance category and both the names of [Advanced Alternative Payment Models \(APMs\)](#) and of eligible clinicians in Advanced APMs. Performance information for clinicians is displayed using measure-level star ratings, percent performance scores, and check marks.

The following documents, available on the [Care Compare: Doctors and Clinicians Initiative webpage](#) and in the [QPP Resource Library](#), include details about the CY 2023 QPP performance information recently added to the PDC and to clinician and group profile pages on the Medicare.gov compare tool:

- [CY 2023 Quality Payment Program Performance Information Published on the Medicare.gov Compare Tool Fact Sheet \(325 KB\) \(PDF\)](#)
- [CY 2023 Clinician and Group Performance Information on the Medicare.gov Compare Tool \(1,215 KB\) \(PDF\)](#)
- [CY 2023 Doctors and Clinicians Star Ratings Fact Sheet \(546 KB\) \(PDF\)](#)
- [CY 2023 Clinician and Group Star Rating Cut-Offs \(122 KB\) \(XLSX\)](#)

If you have any questions about public reporting for clinicians in the PDC and on the Medicare.gov compare tool, contact the QPP Service Center by emailing QPP@cms.hhs.gov, submitting a [QPP Service Center ticket](#), or calling 1-866-288-8292 (Monday–Friday, 8 a.m.–8 p.m. ET).

Prepare for 2025 Performance Year Data Submission

In preparation for the 2024 performance year data submission period, which opens on **January 2, 2026**, we encourage you to sign in to the QPP website with your existing HARP account to ensure you don't lose access. If you don't already have a HARP account and QPP role, please create one. For more information on how to create a HARP account and user profile, review the [QPP Access User Guide \(ZIP, 4 MB\)](#). For a video walking you through the HARP registration process, visit the [HARP YouTube playlist](#). If you have a HARP account, confirm that you can access your account. If you've forgotten your user ID or password, you can review the [HARP Password Reset video](#) for more information on how to regain access to your account.

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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!

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