

MPS NEWS

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Deadline for articles is the 15th of the month preceding publication. Please email heidi@mdpsych.org.

MPS News Design & Layout
Meagan Floyd

**The MPS Council
will meet by
videoconference on
Nov. 10 at 7:30 PM.
All members welcome!**

President's Column

Personal Reflections on The Election and Psychiatric Values

I am writing this column ten days before election day. I am not sure how appropriate it is to use my President's column to discuss the election, but not to do so feels like avoiding the proverbial elephant in the room. The presidential election and the ongoing campaign are omnipresent and touch on most of the social and environmental issues we and our patients have been facing. These include the coronavirus pandemic, the concomitant economic downturn and disruption, the increasing social isolation brought on by the need to control the virus, the move to remote learning for children of all ages, the pitting of one group against another, police brutality faced by minority groups, structural racism, and ultimately who we are as a nation.

Recently, patients, friends, and colleagues have mentioned to me that they can't watch the news any longer, because it makes them too upset, while others can't stop watching and are obsessively checking the latest polls. Some have complained of significant worry, insomnia, and a sense of dread. All of this is compounded by a not so subtle threat of violence either by armed "militias" urged on by people in power or by the use of our own military against the nation's citizens. This has led some of my residents to ask me if I had a plan on how to keep them safe if violence erupts during or after the election. Others wanted a support group depending on the outcome of the election.

Both national parties seem to agree that the country's future is in the balance in

this election. It is hard not to agree that our nation is facing an inflection point that has not been seen in at least a generation or longer.

It is within this context that I have been wondering about what our values are as psychiatrists. While psychiatrists are not a monolithic group, I do think that in general there are certain values with which most of us would agree. We believe in science, so that we can provide the best evidence-based treatments to our patients suffering from psychiatric illness. We believe in the dignity and humanity of every individual. We care for and value our patients regardless of their ethnicity, race, religion, sexual identity, immigration status, etc.

In our work with patients, we strive to help them resolve internal conflicts and overcome past traumas so that they may become their best selves and live rewarding and meaningful lives. We believe in the value of interpersonal relationships and work to help our patients develop loving, supportive, and healthy relationships with people who value them as individuals and not as a means to an end. We help them recognize the unhealthy relationships that they have been drawn to, which are manipulative, cruel, demeaning, and harmful. Our relationship with patients requires us to value honesty and truthfulness.

As a group, I believe that given our profession, we are compassionate, generous, kind, patient, dedicated and hopeful. We value education and knowledge. We are aware of the harmful and lasting effects that words and actions can have, especially when experienced by children. We believe in George Engel's biopsychosocial model thereby recognizing that the structure

(Continued)

of our society, our political discourse, and our culture, all have an impact on the mental and physical health of all of us.

I am hopeful that the results of the coming election will prove that our nation holds similar values and that it will lead us to a healthier environment for all concerned.

(The opinions expressed are those of the author and do not reflect the opinions of the MPS.)

Mark J. Ehrenreich, M.D.

Early voting ends Monday, November 2. Early voting centers are open every day 7 AM to 8 PM. [Click here](#) for details.

Election day is Tuesday, November 3. Polls will be open from 7 AM to 8 PM for in person voting. [Click here for a list of locations.](#)

2021 MPS Dues Notices

The MPS emailed 2021 dues invoices last month and will send them by regular mail this month. Dues remain the same as last year. Please pay MPS dues to MPS, and APA dues to APA. To pay your MPS dues:

- Mail your check made payable to "MPS" to 1101 St Paul Street, Ste 305, Baltimore, MD 21202 **-OR-**
- Pay online using a debit or credit card or Paypal account at [this link](#) or via your MPS [member account](#).

If you have any questions or concerns please call the MPS at 410.625.0232 or email mps@mdpsych.org. Thanks for your continued support of the Maryland Psychiatric Society!

MPS Advocacy on J-1 Visa Proposal

The MPS signed on to [comments](#) submitted by the APA opposing a proposal from U.S. Immigration and Customs Enforcement (ICE) that will eliminate "duration of status" as an authorized period of stay for certain nonimmigrant visas. The rule "will not yield new or better information about J-1 physicians. Instead, it will result in the considerable disruption of services at teaching hospitals where essential and life saving patient care is provided." Psychiatric training programs and U.S. health care generally will experience a significant negative impact if J-1 physicians are unable to continue their training. Furthermore, implementing the proposal will contradict the President's Executive Order on safeguarding mental health during the pandemic. MPS and 25 other organizations joined the APA in calling on the Administration to exclude J-1 physicians from this [proposed rule](#). The [Educational Commission for Foreign Medical Graduates site](#) has a wealth of information on this topic.

MPS Best Paper Awards Deadline January 31

To recognize outstanding scholarship by young psychiatrists in Maryland, the MPS established annual "best paper" awards in 2013. Previous winners are listed [here](#). The Academic Psychiatry Committee is currently soliciting nominations for the 2020 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 2020. Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a **\$200 cash prize** as well as a complimentary ticket to the MPS annual dinner in April 2021.

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 2020. Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a **\$200 cash prize** as well as a complimentary ticket to the MPS annual dinner in April 2021.

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

Jennifer M. Coughlin, M.D.
Academic Psychiatry Committee Chair
Johns Hopkins Hospital
600 North Wolfe Street, Meyer 3-181
Baltimore, MD 21287
jcoughl2@jhmi.edu / mps@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 2021! Thanks to generous funding from the Maryland Foundation for Psychiatry, the winner will receive a **\$200 cash prize** as well as a complimentary ticket to the meeting. Two finalists will also be selected and will receive **\$100 each** in addition to complimentary tickets.

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

September 30 MPS Committee Chairs Meeting

Dr. Ehrenreich reviewed the MPS [Vision, Mission & Values](#), which were established by Council. Council also set three strategic priorities to guide activities in the next few years:

- Membership growth & retention, particularly early career psychiatrists
- Member engagement, including WPS and leadership development
- Financial enhancement focused on non-dues income sources

Committees will consider steps they can take to help move the organization in the direction of these priorities. Collaboration with other committees is ideal, if appropriate. Dr. Nestadt suggested that the MPS consider some kind of free trial for non-members. He noted that since recruiting will be difficult with Covid this would not significantly impact new dues income. There could be a committee open house or other way for non-members to gain familiarity. With activities being held virtually, this is a great time to reach out to psychiatrists in the eastern and western parts of the state. A drawback is that APA would still charge dues, plus some non-members do not support the APA and there is no state-only option. Another negative is that current members may resent non-members getting benefits without paying. This idea will be considered further.

The [2020 MPS member survey results](#) had been shared prior to the meeting. Dr. Ehrenreich discussed a few [highlights](#) and then opened the floor for ideas to collectively address this year's member input. Many responses related to CME programs, with some specifying Covid risk management and practice reopening. To reduce costs, MPS could partner with MedChi or other organizations and include topics like primary psychiatric care.

Dr. Ehrenreich then introduced the Council request for all committees to review Recommendations Against Structural Racism and for Promoting Anti-Racism and Inclusion. On September 8, Council voted to use the Recommendations as a guide for MPS committees to report back with short- and long-term goals that commit the organization to anti-racism and social justice. Drs. Hackman and Balis noted that the recommendations include ideas for each MPS committee; they are not intended as requirements. Chairs will determine how/when the committee members discuss this initiative and how it can apply in the committees' work. This is a first step in an ongoing process in which the MPS will examine, develop, and execute a plan for how it can address structural racism as an organization.

Dr. Coughlin said the Academic Psychiatry Committee would prioritize highlighting published work by minority psychiatrists, not limited to MPS members. Dr. Hanson said the Legislative Committee will soon begin reviewing pre-filed 2021

bills, being alert to opportunities in this area. Bruce Hershfield encouraged submission of articles for the next issue of *The Maryland Psychiatrist*. Drs. Brandt and Means stated there have been no cases to review but their annual meeting will be scheduled soon. Drs. Hackman and Balis and their coalition is available as a resource for any committees or members who need assistance. The APA has posted several resources on its [task force website](#).

Collaboration to Accelerate Behavioral Health Integration

On October 13, the AMA [announced](#) the Behavioral Health Integration (BHI) Collaborative, a new physician initiative to promote the integration of behavioral and mental health care into overall health care. Led by several of the nation's leading physician organizations, the BHI Collaborative includes the collective expertise of the American Academy of Child & Adolescent Psychiatry, American Academy of Family Physicians, American Academy of Pediatrics, American College of Obstetricians and Gynecologists, American College of Physicians, American Osteopathic Association and the American Psychiatric Association. Through the work of the BHI Collaborative, the AMA and other organizations are committed to helping physicians navigate and succeed in a continually evolving health care environment, while ensuring a professionally satisfying, sustainable physician practice experience that meets the comprehensive health needs of patients.

\$20 Billion More Provider Relief Funds

On October 1, HHS [announced](#) the disbursement of another \$20 billion in CARES Act Provider Relief Funds, including new funds for an **expanded** group of behavioral health providers including **any psychiatrist whether or not they take insurance**. These funds are to assist providers who are confronting the rising need for treatment of mental health and substance use issues exacerbated by the COVID 19 pandemic. Visit the [APA website](#) for more details. To apply, go to the [Provider Relief Fund Application and Attestation Portal](#).

The new Phase 3 distribution is designed to balance an equitable payment of 2% of annual revenue from patient care plus an add-on payment to account for revenue losses and expenses attributable to COVID-19. (i.e., physicians who have already received relief payments can also request additional funding for pandemic-related losses, which may be covered after everyone receives 2%.) Applications for the additional funding will be accepted through **November 6**. [Click here](#) for more details.

Anti-Racist Book Club - Part 1

Members of this University of Maryland Medical Center psychiatry resident-led book club read books across genres that explore issues of race as a means of better understanding ourselves, our patients, and our community. The mission is to foster a foundation for change by developing a forum for dialogue, education, and greater self-awareness. All members of the MPS community are invited to participate! So far, we have read:

- July: [Between the World and Me](#) by Ta-Nehisi Coates
- August: [Protest Psychosis](#) by Jonathan Metzl
- September: [Medical Apartheid](#) by Harriet Washington
- Next Up December 13: [All God's Children Need Traveling Shoes](#) by Maya Angelou

What inspired the creation of this anti-racist book club?

As clinicians, we see first-hand the devastating impacts of racism on our patients' health every single day. We formed this group in recognition of the fact that racism is everyone's problem and we all have a role to play in ending it. The first step, as we see it, was to build a common vocabulary by exposing ourselves to the views and voices of Black, Indigenous, and People of Color (BIPOC). This spring, we witnessed the tragedies of George Floyd and Breonna Taylor. When I heard the audio of George calling out for his mother, I realized just how urgently we needed to respond. While we admit that starting a book club won't solve racism, we think it's an important step towards ending the inequalities that we're up against.

What do you hope will come from this initiative?

We want to create an open and inclusive forum for mental health practitioners, trainees, and students to practice the language of anti-racism. By extension, we hope that the book club helps to foster a cohort of mental health practitioners tuned to the inequalities in our communities, in broader society, and even within the present healthcare system. We need to confront the legacy of racist policies and practices that have led us this critical inflection point, and we feel that the efforts of a community of anti-racist mental health professionals can help.

What is a typical 'meeting' like?

It's very informal – we have no PowerPoint slides or planned activities, but we do start our conversations with some questions prepared by a volunteer mediator. Participants are encouraged to share personal stories that arose when reading sometimes difficult material. Our get-togethers are all video conferences in the evenings, though we hope to introduce in-person meetings as soon as it's safe to do so responsibly.

To join the book club, please contact
[Ann Marie Gustafson, M.D., M.P.H.](#)

Congratulations!

Mark Kvarta, M.D., Ph.D. of the Physician-Scientist Training Program at the University of Maryland/ Sheppard Pratt Psychiatry Residency is the co-author of a News & Views review in *Nature Neuroscience* titled "[Illuminating a path from light to depression](#)" published June 17, 2020. Briefly, this News & Views summarizes and contextualizes a recent investigation of a brain circuit that mediates depression-related behaviors induced by mistimed light input. The circuit involves the nucleus accumbens, intrinsically photosensitive retinal ganglion cells, and the perihabenuular nucleus. Congrats on this accomplishment!

On July 10, 2020, **Anique Forrester, M.D.**'s Points of View article, titled "[Why I Stay – The Other Side of Underrepresentation in Academia](#)," was published in the *New England Journal of Medicine*. She shares her response to the departure of underrepresented-minority faculty from academic medical centers due to racial bias, lack of support, and other aspects of systemic racism and social injustice. She has persevered, choosing to remain in academia. In her words, "I realize that the voice of the voiceless has no chance of being heard when there is no representation." Dr. Forrester is an Assistant Professor of Psychiatry and Director of the Consultation-Liaison Psychiatry Fellowship at the University of Maryland School of Medicine. Congrats on this accomplishment!

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 that accomplishes one or more of the following:

- Shares with the public their experience with mental illness in themselves, a family member, or in the community.
- Helps others to overcome their inability to talk about mental illness or their own mental illness.
- Imparts particularly insightful observations on the general subject of mental illness.

A Maryland author and/or newspaper is preferred. [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 15, 2021**.

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

Maryland News

Updated Maryland Emergency Petition Form

Maryland changed the Emergency Petition forms effective October 1. To download the new forms, go to https://www.courts.state.md.us/district/dctcivforms?district_forms%5B0%5D=district_courts%3A67&district_forms%5B1%5D=district_languages%3A59 and search for: **CC-DC-013**. Annette Hanson, M.D. noted on the MPS listserv that the EP changes do not seem significant, and the minor changes are for the better. Emergency departments will have advance warning (in theory) when a patient is coming in, similar to what paramedics do for medical emergencies. And EDs will be able to have better security for those brought in under police custody, regardless of arrest status.

MPS Joins Appeal to Governor Hogan

At a time when our health and behavioral health care systems are under extraordinary pressure, the continuing problems with administrative management of the public behavioral health system have prompted the MPS and scores of other Maryland provider and advocacy groups to appeal to Governor Hogan for corrective action. Optum Maryland's claims payment system remains dysfunctional after almost 10 months in its role as the Administrative Services Organization (ASO). Provider relations, clear communications, basic technical support, and accurate training have also been inadequate, leaving behavioral health providers mired in a system that shifts attention away from clinical care. [Click here](#) to view a copy of the Maryland Behavioral Health Coalition letter.

November 7 MedChi House of Delegates

Robert Roca, M.D., M.P.H. will serve as the Maryland Psychiatric Society's Delegate to the fall MedChi House of Delegates meeting. Delegates will consider reports and resolutions on various topics and policies like health equity, behavioral health reform, diversity, payment issues, telemedicine, and more. Many of MedChi's 2021 legislative, regulatory and public health priorities will be determined. Visit www.medchi.org/HOD for more details, including copies of resolutions. Contact [Catherine Johannesen](#) with any questions.

Commission to Study Mental and Behavioral Health in Maryland

The next [Commission](#) meeting will be **Thursday, November 5** from 4:00 – 6:00 PM [View Livestream](#)

New Behavioral Health Webinar Series

The Maryland Department of Health Behavioral Health Administration (BHA) and MedChi launched a new webinar series: Helping the Helpers and Those They Serve. These webinars are for Maryland's community and hospital health care workers of all disciplines. They are designed to enhance both self-care and resultantly the care provided, as health care workers face numerous stressors including the COVID-19 pandemic, social justice issues, and other factors that can potentially impact the care delivered. CME credits will be available at no cost. All webinars are from 5 to 6 PM. This month's is listed below. [Click here](#) for future webinars.

November 12: [Stress Management During COVID-19 with Attention to Financial Distress](#)

Presenter: Richard Silver, M.D.; Moderator: Alexander Chan, PhD, MFT.

MHCC Telehealth Technology Tool

The Maryland Health Care Commission (MHCC) is sharing a *Telehealth Technology Vendor Portfolio* tool that can save time identifying and reviewing over 70 HIPAA-compliant telehealth vendors. Users can select features, such as compatibility with medical devices or integration with electronic health records, to generate a list of vendors and begin evaluating them and their solutions. The portfolio also includes ratings for ease-of-use and overall satisfaction.

The portfolio is available [here](#). Click "Enable Content" to maximize automation. For users who prefer a traditional excel workbook, click [here](#). Please contact Justine Springer, MPH at justine.springer@maryland.gov or (410) 764-3574 with questions or general feedback.

Webinar Series for First Responders

NAMI Maryland, in collaboration with the Maryland Institute for Emergency Medical Services Systems (MIEMSS) and the Law Enforcement Action Partnership (LEAP), announces the first webinar in a multipart first responders mental health and wellness series, "[Finding Music Within the Noise: A Plan to Thrive During Troubling Times](#)". Planning to Thrive is an approach that recognizes the impact of culture on our perception in these fluid times and rises to meet the challenges we face through implementation of a three-part plan which includes: working "left of bang", winning by design, and building a culture of personal and organizational wellness. Law enforcement commander Marc "Junk" Junkerman will present this program from noon to 1 PM on **December 7**.

Maryland News

Follow-up on Child Psychiatric Rehabilitation Programs

BHA has a new medical necessity criterion that disallows PRP coupling with certain behavioral health services. For instance, Targeted Case Management (TCM) & PRP and IOP and PRP are no longer permitted service combinations. The Community Behavioral Health Association is seeking input from providers and family members who have encountered these barriers. If you are aware of a similar situation, please email Lauren Grimes at lauren@mdcbh.org. If the problem is widespread, this may become a broader coalition advocacy effort.

Addiction Treatment in the Time of COVID-19

As physicians and clinicians have pivoted and adapted to meet this pandemic and the needs of patients, those engaged in the treatment of addictions have met with particular challenges. This MedChi CME webinar will be presented by George Kolodner, M.D. on **November 11** from 5-6 PM. Please [click here](#) for more details or to register.

MDH Health Equity Conference

Save the Date! On **December 3** from 9 AM to 4 PM, the Maryland Department of Health will hold its 17th annual Health Equity Conference virtually. Titled "Reshaping Social Justice, Public Health, and Healthcare Delivery for a New Future Beyond COVID-19," it aims to reconfigure public health for improved minority impact as well as address health disparities in clinical practice, among other goals. For more information, visit the Minority Health and Health Disparities [website](#).

Open Enrollment Starts November 1

Shop for a 2021 health or dental plan at www.MarylandHealthConnection.gov beginning in November. This year, rates and out-of-pocket costs have dropped for many plans! The enrollment deadline for 2021 plans is December 15. To learn more, visit the [find free help page](#).

Urgent Prescriber Reminder

Maryland Medicaid has set a final enrollment deadline for practitioners who order, refer, or prescribe (ORP) for Medicaid participants. Several psychiatrists who prescribe to Medicaid patients (perhaps unknowingly) still have not enrolled. Maryland Medicaid gives practitioners the option to enroll as ORP providers as an alternative to enrolling as a billing or rendering provider. ORP status does not require a contract with Maryland Medicaid as a rendering provider. It is a separate, limited status without full provider obligations. **To comply with federal requirements, everyone who prescribes to Maryland Medicaid participants must enroll by 2021.** Enrollment does not require providers to provide services to additional Medicaid participants. If prescribers do not wish to enroll at all in any capacity, they must coordinate with their Medicaid patients to find another doctor who is enrolled who can begin treating the patient before 2021 begins. **Otherwise these patients will be unable to receive Medicaid coverage for needed prescriptions from the pharmacy.**

- **Please confirm your current Maryland Medicaid enrollment status using the Provider Verification System at <https://encrypt.emdhealthchoice.org/searchableProv/main.action>.**
- **Please confirm whether any of your patients rely on Medicaid to cover the cost of their medications.**

To enroll, please visit the Maryland Medicaid's Electronic Provider Revalidation and Enrollment Portal (ePREP) at eprep.health.maryland.gov. Please visit health.maryland.gov/eprep for more information about enrollment requirements and instructions (scroll to bottom for ORP specifics).

Latest Resources for Maryland Psychiatrists During COVID-19

The MPS maintains a comprehensive set of [coronavirus resources for Maryland psychiatrists](#) with links to detailed requirements for telehealth, state agencies, general COVID-19 information and other information.

See [MedChi's Coronavirus Resource Center](#) for more info that Maryland physicians need to know.

The Maryland Department of Health [COVID-19 webpage](#) has daily updates on the outbreak, FAQs and resources for a wide range of settings.

APA News & Information

October 4 APA Board of Trustees Highlights

The new APA Chief of Diversity and Health Equity and Deputy Medical Director Dr. Regina James started on September 14.

Dr. Levin highlighted examples of recent APA work on structural racism, diversity, equity, and inclusion in the following areas: Government Relations, Education, Diversity and Health Equity, Policy/Regulatory, Library and Archives, Publishing, Communications/Social Media, Legal and Governance, Research/Fellowships, Human Resources and Diversity at Work.

The Presidential Task Force to Address Structural Racism throughout Psychiatry has done three surveys. The findings of its work group that reviewed the Assembly included seven actions for the Board to consider, all of which were passed.

The new APA Learning Management System that launched in August provides a better user experience and supports a greater number of learning formats.

APA continues to oppose H.R. 884/S. 2772, the Medicare Mental Health Access Act, which would define psychologists as physicians under Medicare. APA defeated a congressional proposal to authorize an experimental pilot project that would allow VA psychologists to prescribe to Veterans if they are authorized to do so in their state.

APA held a State Advocacy Conference on September 26.

APA joined the AMA, ACP, AAFP, AAP, ACOG, and AOA in a [collaborative](#) to promote effective and sustainable integration of behavioral and mental health care into physician practice.

APA successfully advocated for an 8% increase in the 2021 Physician Fee Schedule for psychiatry and advocated with CMS on several telehealth provisions.

APA is working with medical and training organizations to oppose the proposed rule re J-1 Visa Residents. [{MPS signed on}](#) to the APA comments.]

The Board voted to approve Prolonged Grief Disorder as a DSM-5 disorder, moving it from Section III of DSM-5 to section II, pending Assembly approval. In addition, the Board voted to approve the capitalization of the terms *Black* and *White* when used in DSM-5 to refer to distinct racial/ethnic groups (other groups are already capitalized).

APA Town Hall on Structural Racism - Part 3

The Trauma of Structural Racism and its Transmission Across Generations is the topic for the third APA Town Hall to be held Monday, **November 16** from 8 to 9:30 PM. Disparities in mental health for people of color remain pervasive and persist across generations. There is a growing consensus that structural and interpersonal racial discrimination fundamentally impact mental health in communities of color. This town hall will delve into the impact of the persistent stress of experiencing discrimination across generations. [Register for the Town Hall](#). Have a question you would like the panel to address? [Submit your question here](#).

Free Virtual Conference on First-Episode Psychosis

Join APA and SMI Adviser **November 12-13** for the 3rd National Conference on Advancing Early Psychosis Care in the United States: Addressing Inequalities - Race, Culture, and COVID. This free, interdisciplinary virtual event will include 20 sessions focused on evidence-based care for individuals who are early in the course of a psychotic illness. Earn up to 8 *AMA PRA Category 1 Credits*. [Click here](#) for details or to register.

My Mental Health Crisis Plan

The mobile app, [My Mental Health Crisis Plan](#), allows people with serious mental illness to create a plan to inform their treatment should they experience a mental health crisis. Users can easily create and share a psychiatric advance directive (PAD), a legal document outlining preferences for treatment during a crisis. The app uses informational videos to explain to users what PADs are and how they work. It allows users to indicate their preferences for care, designate a person to make decisions on their behalf, choose what hospitals, physicians, and medications they prefer, note who should be informed about their admission into a psychiatric hospital, and who should care for their children if they are unable to do so. The app also includes state-specific requirements, such as signatures or witnesses, for completing the PAD. The app was developed by SMI Adviser, an APA initiative funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Find it in the Apple App Store and Google Play.

FREE APA Course of the Month

Try the [APA Learning Center](#) free with the **Members Course of the Month**. Each month, members have free access to an on-demand CME course on a popular topic!

Medicare Updates

MPS Support for E/M Increases and Telehealth Flexibilities

In October, MPS submitted [feedback to CMS](#) regarding its proposed 2021 Medicare Physician Fee Schedule. MPS supported higher reimbursement and streamlined documentation for E/M services, and recommended that CMS increase the entire family of psychotherapy codes, not just the stand-alone codes. MPS also urged CMS to permanently retain several of the recent telehealth flexibilities, including removal of geographic restrictions, substance use disorder treatment, supervision of residents, removal of frequency limits, and coverage for audio-only services.

2019 QPP Performance Results

CMS [announced](#) a report on MIPS eligible clinicians who submitted data to the Quality Payment Program (QPP) as an individual, group, virtual group, or Alternative Payment Model (APM) Entity for 2019.

- 97.44% of MIPS-eligible clinicians engaged in QPP
- 538,323 participated in MIPS as individuals or groups.
- 416,281 eligible clinicians participated in MIPS through APMs.
- 85.22% in small practices participated
- The mean score for small practices increased from 65.69 in 2018 to 68.99 in 2019.
- Total Qualifying APM Participants increased from 183,306 in 2018 to 195,564 in 2019.
- 65,237 (6.83%) received reweighting of one or more MIPS performance categories due to the MIPS Extreme and Uncontrollable Circumstances policy for COVID-19.
- Of those, 29,136 received reweighting of all their performance categories and were assigned a neutral score.

The maximum MIPS payment adjustment in 2021 for exceptional performance during 2019 will be 1.79%. Some other clinicians may see lower than expected positive payment adjustments.

MIPS Value Pathways, or MVPs, are part of CMS's shift from siloed activities and measures to an aligned set of measure options specific to a clinician's scope of practice and patient care. CMS plans to launch MVPs in 2022, [as currently proposed](#). CMS has [proposed](#) an optional reporting and scoring pathway for [MIPS APMs](#): the **APM Performance Pathway**, a single, pre-determined measure set for the 2021 year. More information about 2020 program changes is available on the [QPP website](#).

Virtual Group Elections for 2021 MIPS

To form a virtual Merit-based Incentive Payment System (MIPS) group for 2021, an election must be submitted to CMS [via e-mail](#) by **December 31**. [NOTE: A virtual group must submit an election to CMS every year that it intends to participate in MIPS. If your virtual group was approved for 2020 it is still required to submit an election to CMS for 2021.] A virtual group is a combination of 2 or more Taxpayer Identification Numbers (TINs) consisting of:

- Solo practitioners who are MIPS eligible (a solo practitioner is defined as the only clinician in a practice); and/or
- Groups that have 10 or fewer clinicians (at least one clinician within the group must be MIPS eligible). A group is an entire single TIN.

A virtual group determines its own makeup, but a solo practitioner or group can only participate in one virtual group during the year. Participating in MIPS as a virtual group has advantages:

- Can increase performance volume in order to be reliably measured; and
- Opportunity for collaboration, shared resources, and potentially increased performance.

Key items needed for submission of a virtual group election:

- Establish a formal written agreement between each TIN within the group (see Agreement Template in the Virtual Group Election Process Guide within the [2021 Virtual Group Toolkit](#)).
- Identify an official virtual group representative.

Elements to include in an election:

- Acknowledgement of a formal written agreement between each TIN within the virtual group.
- The name and contact information for the official virtual group representative.
- The name and TIN for each practice, and all associated National Provider Identifiers (NPIs) under each TIN.

Submit the election via e-mail to CMS at MIPS_VirtualGroups@cms.hhs.gov by **December 31** (see Election E-mail Sample in the Virtual Group Election Process Guide within the [2021 Virtual Group Toolkit](#)).

For further information, checklists for virtual groups, and sample documents, download the [2021 Virtual Group Toolkit](#). Or, contact the Quality Payment Program at 1-866-288-8292 or by e-mail at: QPP@cms.hhs.gov. Consider your [local technical assistance organization](#) for no-cost assistance to small, underserved, and rural practices.

Medicare Updates

CMS Announces Additional Year to Repay Medicare COVID Loans

CMS [announced](#) amended terms for \$106 billion in payments that were issued to practitioners under the Accelerated and Advance Payment Program to assist them with cash flow issues during the early coronavirus phase. This Medicare loan program allows CMS to make advance payments, typically in emergency situations. Under the *Continuing Appropriations Act, 2021 and Other Extensions Act*, repayment will now begin one year from the issuance date of each payment.

Practitioners were required to make payments starting in August of this year, but with this action, repayment will be delayed until one year after payments were issued. After that first year, Medicare will automatically recoup 25 percent of Medicare payments otherwise owed to the provider for eleven months. At the end of the eleven-month period, recoupment will increase to 50 percent for another six months. If the provider or supplier is unable to repay the total amount during this time-period (a total of 29 months), CMS will issue letters requiring repayment of any outstanding balance, subject to an interest rate of four percent. CMS will communicate in the coming weeks as to the specific repayment terms and amounts owed by individual clinicians and practices. [Click here](#) for the fact sheet.

MedChi is asking for additional economic support from the State of Maryland and Washington, DC to help beleaguered physicians. That aid would include complete forgiveness of the Medicare advance payment loans. MedChi CEO Gene Ransom did an [interview with WBAL radio](#) on the need for forgiveness and more help.

Curbside Conversations: Exclusive MPS Member Resource

Curbside Conversations is members with in-depth knowledge in specific areas having informal chats with other MPS members seeking that information. These discussions are not formal consultations, but rather a collegial resource that is offered voluntarily to others in the MPS community.

Contact information for those who volunteer is available only to MPS members for the categories below. Please email mps@mdpsych.org for details.

- Child & Adolescent Psychiatry, including infants
- ECT/TMS
- First Episode Psychosis
- Geriatric Psychiatry
- Psychopharmacology
- Substance Use Disorders/Addiction
- Women's Mental Health/Perinatal Psychiatry

There are other categories with limited participation so just ask if you don't see what you need.

We're looking to expand this offering! If you have special and/or expert knowledge AND are willing to be a potential resource for other members with questions, please email mps@mdpsych.org.

ABPN Pilot Approved as Permanent Alternative

The ABPN [announced](#) that the "Article Assessment Pathway" that was being tested as a "Pilot Project" for three years starting in 2019 has been approved as a permanent alternative to the 10-year Continuing Certification (CC/MOC) examination for meeting the CC/MOC Part III program requirements. ABPN will offer the Article Assessment Pathway to all Diplomates beginning with the 2022 assessments and exams, including ABPN subspecialties.

Membership

Transfers In

John V. Campo, M.D.
Roberta Rasetti, M.D., Ph.D.

Holiday Office Hours

The MPS office will be closed **November 26th - 27th** for Thanksgiving. Don't forget you can pay your dues, update your profile or find a referral for a patient on our [website!](#)



Special Member Resources Spotlight

Creating a future where disease is a thing of the past.

We are Janssen, the Pharmaceutical Companies of Johnson & Johnson. We are focused on treating and preventing some of the most complex and devastating diseases of our time in oncology, immunology, neuroscience, infectious diseases & vaccines, cardiovascular & metabolism, and pulmonary hypertension. We pursue the most promising science, wherever it might be found. Learn more at www.janssen.com.

Porrok1@its.jnj.com

LCampbe5@its.jnj.com



March 2020 cp-138067v1

Hushmail

Still struggling with your virtual office setup?

Let us make client communication and paperwork a breeze



Sign up to get your free month trial

MARYLAND STATE DEPARTMENT OF EDUCATION

EQUITY AND EXCELLENCE

The Maryland Disability Determination Services (DDS) is a State agency within the Division of Rehabilitation Services under the Maryland State Department of Education. The Social Security Administration (SSA), contracts with State agencies to administer the disability portion of their program. Using SSA regulations, our agency adjudicates Social Security Disability Insurance and Supplemental Security Income claims. The DDS is responsible for developing medical evidence and making the medical determination for SSA. How can you assist this process?

1. We have agreements with psychiatrists in the community to perform consultative examinations
2. We rely on your medical record of evidence for your patients that are applying for disability
3. We hire in house psychiatrists to assist in the medical review process
 - a. We are currently hiring 2 part-time psychiatry positions
 - b. We offer a generous benefit package, to include annual, personal, sick and holiday leave, medical benefits, pension and several other benefits

We look forward to talking to each one you about these opportunities and our program. If interested please contact the Maryland Disability Determination Services at 410.308.4360 for further information.

CATHOLIC CHARITIES BALTIMORE
CHERISHING THE DIVINE WITHIN ALL

Not Just a Job ...

Repeatedly designated as a Baltimore Sun Top Workplace, Catholic Charities is a dynamic, non-profit organization that is staffed by dedicated mental health professionals. Our programs are pleasant and energizing places to work. Support services are ideal, both clinically and administratively. Ample time is made available to provide high-quality psychiatric assessments and medication management.

Visit www.cc-md.org to learn about our cutting edge, continuum of mental health programs led by one of the largest psychiatry teams in Maryland. For more information, please contact: Sue Franklin, LCSW-C, Manager of Psychiatry Services, 667-600-3024 or sfranklin@cc-md.org

Sculpt a rewarding career that makes a difference in your community!

Thank You!

The following members paid additional MPS dues for 2021 even though they qualify for reduced dues because they have reached life status. **We appreciate your support of the Maryland Psychiatric Society!**

Thomas Allen, M.D.

Louis Cohen, M.D.

Jill Joyce, M.D.

Jill RachBiesel, M.D.

Silverine Samaranayake, M.D.

Addressing Election Anxiety

APA has a [blog with resources](#) to help members and the general public address feelings during this election cycle. This is a first step; APA will monitor and speak out as needed.

Possible Nominees to a New Administration

Both parties are beginning to consider appointed positions in either a Trump second term or a Biden first term. It is important that psychiatrists work throughout any Administration. To assist, APA is pulling together potential psychiatrist nominees to share with either Administration. If you are interested, please provide the following information:

Which administration – Trump or Biden;

- Agency AND name of the position (click [here](#) for the Plum book of appointed positions within the Executive Branches of the Federal government);
- Previous government experience and other relevant experience;
- Any relevant history of political or advocacy engagement; and
- CV.

Any appointed position will be heavily scrutinized. Social media, TV interviews etc, will be reviewed when considering candidates. Please send your interest with the information requested to nom2020@psych.org by **November**



CLASSIFIEDS

POSITIONS AVAILABLE

Physician Group at University of Maryland St. Joseph Medical Center Seeks Consultation-Liaison Psychiatrist:

Competitive Salary and Excellent Benefits! University of Maryland St. Joseph Medical Center is a member of the University of Maryland Medical System, a multi-hospital system with academic, community, and specialty service missions reaching every part of Maryland and beyond. Consultation-Liaison Psychiatrist to provide Psychiatric Consultations on the Medical/Surgical units at UMMS/SJMC. Full-time position. Part-time and moonlighting hours also available for ER coverage (evenings and weekends). Maryland MD License is required. To Apply: Please EMAIL your resume and cover letter to stevec@umm.edu. Or FAX to 410-750-8556. You may also MAIL to: Steven Crawford, M.D., 6535 N Charles St, Suite 300, Baltimore MD 21204.

Spectrum Behavioral Health in Annapolis, Arnold and Crofton MD is seeking a psychiatrist for its growing private practice. Position includes attractive compensation, collegial multi-disciplinary staff, full administrative support, professional autonomy and premium windowed office space! This exciting opportunity offers a great income, stimulating teamwork, desirable location, and meaningful community impact. If interested please visit www.spectrum-behavioral.com or email Scott E. Smith, Ph.D. at sbhgmt18@gmail.com.

PSYCHIATRY POSITIONS: MedStar Health is seeking psychiatrists to work in the Baltimore area in a variety of settings. Our hospitals provide inpatient, outpatient, intensive outpatient, partial hospitalization and consult liaison services. We offer flexible hours with competitive comp plans and benefits including CME reimbursement, 7 weeks paid time off, holidays and personal leave, 403 B match, medical benefits and paid malpractice ins. and much more! Please email CV to stephen.pasko@medstar.net.

OFFICE SPACE AVAILABLE

BETHESDA: Offices for rent in psychotherapy suite carefully following CDC guidelines for safe opening. Furnished and unfurnished space available. Flexible term. Free WiFi, beverages, color copier. Very friendly and professional clinicians. Contact Keith Miller: 202-360-9996 or keith@keithmillercounseling.com.

International Survivors of Suicide Loss Day November 21

[International Survivors of Suicide Loss Day](#) is
Saturday, November 21, 2020

Rewarding Opportunities for Psychiatrists Across Maryland

SHEPPARD PRATT IS SEEKING PSYCHIATRISTS TO WORK ACROSS MARYLAND IN A VARIETY OF TREATMENT SETTINGS INCLUDING:

Inpatient: Adult, Child & Adolescent, Eating Disorders, and Geriatric

Crisis Assessment Services

Residential: Medical Director, The Retreat; Service Chief, Adolescent Residential Treatment Center

Consultation-Liaison

Medical Education Services

Southern Maryland: Medical Director, Adult, Child & Adolescent

REQUIREMENTS

- Must be board-certified or board-eligible
- Must have a current license to practice in Maryland at the time of hire
- Individuals hired for inpatient, PHP, and residential school services participate in a call schedule

WHY SHEPPARD PRATT?

- Physician-led organization
- Generous compensation package with comprehensive benefits, including medical, dental, vision, and life insurance; an extensive wellness program; and ample leave
- Relocation assistance
- Sign on bonus
- A network of the brightest minds in psychiatry
- Grand rounds, CME opportunities, on-site lectures
- State-of-the-art research and technology
- Cross-discipline collaboration

For more information, please contact Kathleen Hilzendeger, Director of Professional Services, at **410.938.3460** or **khilzendeger@sheppardpratt.org**.

About Sheppard Pratt

Consistently ranked as one of the top ten psychiatric hospitals by *U.S. News & World Report*, Sheppard Pratt is the nation's largest private, nonprofit provider of mental health, substance use, special education, developmental disability, and social services. We employ more than 95 doctors who all share a passion for providing the best care to those we serve. Visit sheppardpratt.org to learn more about our services. *EOE.*



sheppardpratt.org

Are you passionate about helping an underserved population
and making a difference in the lives of your patients?
Then pick a career with Centurion!



Centurion is a leading provider of comprehensive healthcare services to correctional facilities nationwide. We are proud to provide quality mental health services to the Maryland Department of Public Safety and Correctional Services.

Full-time Chief Psychiatrist positions available in the Baltimore, Jessup, and Eastern regions of Maryland!

We are offering enhanced compensation and bonuses for these roles!
Staff Psychiatrist opportunities are also available.

Why explore a career in correctional medicine?

- Reasonable caseloads and diverse patient population
- Secure and supportive work environment
- Opportunity to make a real difference in the lives of those who need it most!

In addition to rewarding work and competitive salaries, we offer a comprehensive benefits package!

Contact Jane Dierberger for more information:
844.477.6420 | jane@teamcenturion.com



DISCOUNTED COVERAGE FOR EXITING MILITARY PSYCHIATRISTS



Following retirement or discharge from the military, PRMS' medical professional liability insurance coverage offers **up to an 80% discount** for all psychiatrists for up to the first five years of practice.

Other program benefits include:

- Additional discounts based on your specialty, psychiatric association membership, and more.
- Enhanced psychiatry-specific policy.
- Access to knowledgeable in-house risk managers, quarterly risk newsletters, risk alerts, and a library of more than 360 resources.
- Expert in-house claims team and a nationwide panel of attorneys experienced in psychiatric litigation - over 29,000 psychiatric claims handled!



CHRIS TORRE
SENIOR ACCOUNT ADVISOR
PRMS, 13 YEARS

PRMS is proud to support the **Purple Heart Foundation** this November.

When selecting a partner to protect you and your practice, consider the program that puts psychiatrists first. Contact us today.

More than an insurance policy

(800) 245-3333 | PRMS.com/Military | TheProgram@prms.com



Actual terms, coverages, conditions and exclusions may vary by state. Insurance coverage provided by Fair American Insurance and Reinsurance Company (NAIC 35157). FAIRCO is an authorized carrier in California, ID number 375-7. www.fairco.com.