



Volume 38, Number 3

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July 2024

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Deadline for articles is the 15th of the month preceding publication. Please email [hcdi@mdpsych.org](mailto:hcdi@mdpsych.org).  
 MPS News Design & Layout  
 Jora Hritz

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

President's Column

**Advocacy Efforts**

In pursuit of its mission to enhance public health and ensure equitable access to mental health services, the MPS has actively engaged in a series of advocacy initiatives addressing critical community issues. These efforts are designed to promote evidence-based strategies, advocate for policy reforms, and safeguard resources essential for advancing mental health care.

Recently, the MPS endorsed a significant [funding request dedicated to advancing research on gun violence prevention](#). This initiative underscores our commitment to mitigating the impact of gun violence through evidence-based strategies aimed at community safety and well-being.

Additionally, we joined forces with the Parity Coalition to address concerns regarding the Department of Health's lackluster enforcement of the Mental Health Parity and Addiction Equity Act of 2008 within Maryland's Medicaid program. The [coalition's joint letter](#) highlights pressing issues and advocates for stricter adherence to parity laws, aiming to ensure fair treatment for individuals seeking mental health and addiction services.

Further demonstrating its advocacy prowess, we [co-signed a letter with the Parity Coalition urging state leaders to appoint an Insurance Commissioner](#) who will prioritize equitable access to mental health and substance use disorder services through commercial insurance plans. This effort seeks to address disparities and improve healthcare access for all Marylanders.

In a direct appeal to government officials, the MPS also sent a letter to the Secretary of Health, Deputy Secretary, Governor, and Lt. Governor expressing concerns over [recent funding cuts impacting psychiatric research and residency programs](#). This advocacy aims to safeguard critical resources necessary for advancing psychiatric care and training future mental health professionals.

Looking ahead, we anticipate an important meeting with representatives from the Behavioral Health Administration (BHA) scheduled for early August. This forthcoming engagement presents an opportunity for us to collaborate directly with stakeholders, advocating for policies that support comprehensive mental health initiatives and community well-being.

Through these proactive advocacy efforts, the MPS continues to show its commitment to advancing public health and promoting equitable access to mental health services. By collaborating with coalitions, engaging government officials, and advocating for policy reforms, we strive to make a meaningful impact in improving mental health outcomes and fostering community resilience.

Please voice your opinion, join us in advocating for evidence-based strategies, policy reforms, and resource protection essential for advancing mental health care and addressing community needs.

*Theodora Balis, MD  
 President*

## 2024-2025 MFP Officers and Directors

The Maryland Foundation for Psychiatry (MFP) Officers and Directors for the coming year were approved by MPS Council on June 11.

**PRESIDENT:** Elias K. Shaya, M.D.

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

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

### BOARD OF DIRECTORS:

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

### HONORARY DIRECTORS:

Robert P. Roca, M.D.  
Neil E. Warres, M.D.  
William C. Wimmer, M.D.

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

## MPS Signs onto Gun Violence Prevention Funding Letter

In May, the MPS signed onto a gun violence prevention research funding letter that more than 430 national, state, and local medical, public health, and research organizations signed and that was sent to Senate and House offices to support funding for gun violence prevention research in June. The urged Congress to support providing \$35 million for the Centers for Disease Control (CDC), \$25 million for the National Institute of Health (NIH), and \$1 million for the National Institute of Justice (NIJ) for firearm morbidity and mortality prevention research as part of FY 2025 appropriations. This research is critical for developing a comprehensive, evidence-based approach to reducing firearm-related violence, including suicides, violent crime, and accidental shootings. Click here to [view the letter](#).

## National Minority Mental Health Awareness Month

July is designated as Bebe Moore Campbell National Minority Mental Health Awareness Month. Mental health affects us all, and everyone deserves the inherent right to have access to mental health support, resources, and care. Still, not everyone has equal and equitable access to these crucial services because of stigma, shame, or fear of judgment. These factors create significant barriers that prevent individuals from seeking mental health care. [Visit the National Alliance on Mental Health](#) to learn more about how you can help spread awareness.

## NEW ECP Organized MPS Fellowship

Early-Career Psychiatrists are encouraged to apply for a new one-year fellowship at the Maryland Psychiatric Society! The fellowship is designed to provide a unique opportunity to a current early career psychiatrist (ECP) member interested in leadership, outreach, and member engagement.

During this fellowship, the candidate will coordinate meetings and events tailored to ECPs and Resident Fellow Members (RFM), develop new ideas to promote MPS membership, help cultivate and identify ECP/RFM members interested in leadership, assist with ECP/RFM member retention, and gain insight from mentors and peers to develop new ideas that help promote MPS as the voice of psychiatry within the state of Maryland. Through mentorship and shadowing opportunities, this fellowship places an emphasis on the field of administrative psychiatry. The ECP Organized Fellowship will provide recipients with the foundation for success in future Maryland Psychiatric Society leadership positions and beyond.

The ECP Organized Fellowship is funded by the Maryland Psychiatric Society in the total amount of \$20,000.00, broken into \$5000.00 per year - one fellowship per year, for 4 years. (2024, 2025, 2026, 2027). Consideration for future funding will be evaluated in 2026.

The application window will begin on June 25<sup>th</sup> each year and close on August 15<sup>th</sup> and a candidate will be selected by September 1<sup>st</sup> to complete a 12-month term. [Click here](#) to learn more about program benefits, expectations, and application details. Please send complete application packet to [mps@mdpsych.org](mailto:mps@mdpsych.org) by the specified deadline.

## Membership & Recruitment Committee Volunteers Needed!

**The Membership & Recruitment Committee is looking for volunteers!** This committee recruits and evaluates applicants for membership, in accordance with MPS and APA policy. It also considers special member requests, works on recruitment, including outreach to area residency training programs, and carries out retention efforts.

We are looking for members who are excited to tackle projects focused on member engagement, retention, and recruitment! If you are interested in joining or have any questions, please email [jhritz@mdpsych.org](mailto:jhritz@mdpsych.org).

## June 11th Council Highlights

Consent Agenda

Dr. Vidal noted the Council Minutes for the April meeting, 2024 meeting dates, 2024-25 MPS Leadership and staff listings, June Executive Director's Report, April MedChi House of Delegates Report and MPS SPC Committee minutes were included in the consent agenda, Dr. Vidal asked if there were any concerns or comments. Hearing none, the consent agenda was approved unanimously.

Support for Strategic Priorities

Dr. Vial provided an update on activities that support MPS Strategic Priorities. She reported that since March:

- MPS staff worked to contact ECPs, and General and Life Members urging them to apply for FAPA, Appointed Committee Chairs and generated Committee rosters for 2024.
- Developed and sent 2024 MPS Annual Survey.
- Mailed annual update form to all members.
- Coordinated member social event for August in accordance with Financial Task Force Recommendations.
- Reached out to graduating RFMs for info on their post training plans.

Executive Committee Report

Dr. Balis presented the Executive Committee report. She noted that in July reps from both MPS and WPS leadership will meet to review the MOU arrangement. She was pleased to report that the April in person MPS annual meeting held at Fogo de Chão in Baltimore was a great success. Ann Hackman, M.D. received the [Lifetime of Service Award](#). The Academic Psychiatry Committee recognized winners of the [Paper of The Year](#) and [Best Poster](#) contest.

Dr. Balis mentioned that the annual membership survey began last month – respondents are eligible to win one of three \$100 credits toward dues or events. She encouraged Council to take the survey. She concluded with noting that The MPS held a CME Program on Thursday, April 4, 2024, between 7:00 PM and 9:00 PM. Dr. Sean Heffernan presented on the topic of Mental Health Care Services on College Campuses. He spoke to 27 attendees, all of whom were respectful and engaged in positive and compelling discussions after the presentation was complete. The meeting profit was \$725.00

APA Assembly Report

Dr. Anne Hanson presented the Assembly Report from the May meeting. The meeting in New York included updates regarding APA administration, financial issues, and advocacy efforts. Dr. Marketa Wills began her role as CEO on June 1<sup>st</sup>. The new APA president, Dr. Ramaswamy Viswanathan, announced that the theme of his presidency will be the promotion of lifestyles for physical and mental health. Area 3 was recognized, once again, for having the highest percentage of voters in the recent election.

The financial status of the APA remains a concern. In 2023 the organization had a final net loss of \$5.2 million. Revenue from the 2024 annual meeting revenue was expected to fall short of the budget due to decreased sponsorship revenue and lower attendance. All Area meetings will be virtual since there is no money to support in-person meetings. Two million dollars was cut from the staffing budget and attempts are being made to rent out unused office space in APA headquarters.

This Assembly session reviewed 22 position statements and 18 action papers. The action papers which passed out of the Assembly covered a wide range of topics. One paper will require the APA to create a resource document for members to educate them about the clinical and legal aspects of working with non-physicians. Another would encourage the APA to promote standardized personal safety training for residents and education about kratom for all members. Another paper would require the APA to encourage the FDA to review the need for continued black box warnings on SSRIs, and to create a position statement for training in psychiatry for primary care physicians in internal medicine, ob-gyn, and family medicine. Finally, the APA will be required to work with the AMA and other organizations to advance policies to bill for prior authorization and to provide education on options for billing for this time.

New Business

Maryland Foundation for Psychiatry (MFP) 2025 Slate of Officers: Dr. Vidal presented the 2025 MFP slate for Council vote. After reviewing the slate, a motion was made for approval, seconded and then a vote was held, and the slate passed unanimously.

Drs. Balis, Means and Ashely next presented the MPS ECP Fellowship application for Council approval. The Early-Career Psychiatrist Organized Fellowship is a one-year fellowship at the Maryland Psychiatric Society (MPS) designed to provide a unique opportunity to a current early career psychiatrist (ECP) member interested in leadership, outreach, and member engagement. During this fellowship, the candidate will coordinate meetings and events tailored to ECPs and Resident Fellow Members (RFM), develop new ideas to promote MPS membership, help cultivate and identify ECP/RFM members interested in leadership, assist with ECP/RFM member retention, and gain insight from mentors and peers to develop new ideas that help promote MPS as the voice of psychiatry within the state of Maryland. The application window will begin on June 25<sup>th</sup> each year and close on August 15<sup>th</sup> and a candidate will be selected by September 1<sup>st</sup> to complete a 12-month term. After reviewing the ECP Fellowship description, a motion was made

(Continued)

## June 11th Council Highlights Cont.

for approval, seconded and then a vote was held, and the Fellowship award passed unanimously.

The next item under new business was the approval of two updated position papers. "MPS Endorses the Black Psychiatrists of America and the American Association of Medical Colleges' Statements on Police Brutality and Racism in America" and "MPS Supports Humane Care for Asylum Seekers." The MPS CPD Committee reviewed and updated both statements, which are being presented to Council for approval at tonight's meeting. Council reviewed both statements. Minor edits were suggested and made, at which point a motion was made for approval, seconded and then a vote was held, and both updated position papers passed unanimously.

Drs. Balis and Vidal reported on the concerning trend coming from the Secretary of Health regarding cutting funding for psychiatric services and programs within the state. In a direct appeal to government officials, the MPS sent letters to the Secretary of Health, Deputy Secretary, Governor, and Lt. Governor expressing concerns over [recent funding cuts impacting psychiatric research and residency programs](#). Dr. Balis reported that there is growing concern with the lack of transparency in which these decisions are being made. Council agreed to revisit the topic after the proposed meeting with MPS EC and BHA tentatively scheduled for August.

## 2024 MPS Member Survey

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

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

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

## Member Update Forms

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

## CLIMATE CORNER

Let's continue the summer series on heat and mental health. This month's column explains why psychiatric patients are at higher risk of heat-related illness.

[Heat stroke](#) is one form of heat-related illness, defined as elevated core body temperature (typically > 105°F) and neurological changes in the setting of an environmental heat load. The classic form (also called passive heat stroke) occurs in individuals whose bodies cannot effectively dissipate heat from the ambient environment. Populations particularly at risk include older adults and prepubertal children, as well as people who are socially isolated or immobile. Many psychiatric medications affect the body's cooling mechanisms and thus confer risk for classic heat stroke: beta-blockers, anticholinergics, SSRIs/SNRIs, TCAs, MAO-Is, and sympathomimetics. Exertional heat stroke occurs in the context of outdoor physical activity, with at-risk populations including outdoor workers, soldiers, or athletes (unfortunately, there are few regulations in place to protect [outdoor workers](#) from high heat). Amphetamines and alcohol increase the risk of exertional heat stroke.

Other populations that are at risk of heat-related mortality include patients with schizophrenia. One study analyzing mortality during an extreme-heat event in British Columbia in 2021 found that patients with schizophrenia had the highest [odds-ratio](#) of all-cause mortality during extreme-heat events (3.07 [2.39, 3.94]), higher than people with kidney disease (1.36 [1.18, 1.56]) or ischemic heart disease (1.18 [1.00, 1.38]); looking at heat-related causes of death specifically, the odds ratio for people with schizophrenia was 3.99 [2.62, 6.08]. The Washington Post ran a poignant [article](#) last year about one young man with schizophrenia who died during an Arizona heat wave.

An additional consideration for psychiatrists includes counseling patients on lithium regarding risks of lithium toxicity in a setting of significant sweating and fluid loss that occurs in hotter temperatures.

As a psychiatrist, you can discuss heat-related risks with your patients. A helpful toolkit for monitoring and mitigating risk of heat stroke by patient population is available [here](#). Additional educational tools for patients and psychiatrist can be found on the [Climate Psychiatry Alliance website](#).

*Elizabeth Ryznar MD MSc*

## New 988 Print Material Updates

Check out the **new** one-stop-shop website for ordering 988 awareness [print materials](#). Providers are still able to get to the "order print materials" link from the current [988 Partner Toolkit](#). You'll also still be able to find all the print materials when searching for marketing materials in the Partner Toolkit. The new website lets you order multiple types of products and multiple packages of products all from a single page. After you place your order, you will receive a confirmation number from the U.S. Government Publishing Office. As always, every item in the new order website gives you the option to download a printer-ready file that you can take to a local print shop to print materials in bulk.

## Funding for Behavioral Health Needs

Last month the U.S. Department of Health and Human Services announced notices of funding opportunities aimed at improving behavioral health for racial and ethnic minorities, and other underserved populations, providing training and technical assistance to programs serving these populations, and integrating primary and behavioral health care. The funding totals \$31.4 million and supports the Biden-Harris Administration's efforts to address the mental health and overdose crises, as well as continuing efforts to advance health equity and address the consistent and disproportionate impact of HIV on racial and ethnic minorities. [Click here](#) to read more.

## Snapshot Overdose Epidemic Reports

The nation's drug overdose and death epidemic has killed more than one million Americans in the past 25 years. The epidemic continues to be driven by illicitly manufactured fentanyl, often in combination with other toxic adulterants. Nearly 104,000 deaths were [reported](#) in the United States between Dec. 2022 and Dec. 2023. To provide an overview of the depth and breadth of the epidemic, two updated AMA issue briefs provide a [national snapshot](#) and [state-by-state reports](#).

## More on Prior Authorization from AMA

- What's the real impact of prior authorization? [Here's what AMA members say.](#)
- Overuse of prior authorization wastes physicians' time and harms patients. [Dive deep on five needed reforms.](#)
- The AMA is challenging insurance companies to [eliminate care delays, patient harms and practice hassles.](#)

## Prior Authorization Bill Reintroduced in Congress

Last month lawmakers [introduced an updated version of the Improving Seniors' Timely Access to Care Act](#) in both the House and Senate.

In 2022 the Improving Seniors' Timely Access to Care Act garnered more than 378 total bipartisan cosponsors in the House and Senate and passed the full House of Representatives. In addition, the legislation secured endorsements from more than 500 outside organizations, including the AMA and numerous national and state medical societies. Unfortunately, the version of this bill that passed the House was never considered in the Senate because it produced a score of \$16 billion from the Congressional Budget Office. The recently introduced bill is amended to ensure it ultimately scores as close to \$0 as possible.

More specifically, the legislation requires the Office of National Coordinator for Health Information Technology and the Centers for Medicare & Medicaid Services to submit a report to Congress on the use of prior authorization in Medicare Advantage and what constitutes "real-time decisions" for "routinely approved services." The legislation also delegates explicit authority to CMS to implement this newly defined real-time prior authorization decision-making process for routinely approved services in Medicare Advantage. Finally, the legislation delegates explicit authority to the secretary of Health and Human Services to enforce the real-time prior authorization processes for routinely approved services and issue tighter timelines for health plans to make utilization management decisions, such as 24 hours for emergent services.

*AMA Advocacy Alert 6.14.24*

## New AMA Survey Shows Prior Authorization Harms Patient Care

Access to patient-centered care continues to suffer as health insurance companies impose prior authorization barriers on necessary care and substitute corporate policy for clinical decisions that are in patients' best interest. Turmoil caused by excessive authorization controls leads to serious or life-threatening events for patients, unnecessary waste, and physician burnout, according to the latest survey. [Read 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 410-625-0232.

## 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

Natasha Haddad, M.D.  
James Lee Baier, M.D., M.P.H.  
Ayman Saleh, M.D.

### Transfer

Victor Patron Romero, M.D.  
Naziya Hassan, M.D.  
Grace Onuma, M.D., BSC  
Wes Smoot, M.D.

### Reinstatement

Tanvi Gupta, D.O., M.S.

## Members Out & About

**Marissa Flaherty, M.D.** was published in AAMC for her article "[Learning to Decomartmentalize as Self-Care.](#)" She discusses that, as a physician, it is important to decompartmentalize in order to provide the best care to patients as well as address your own self-care needs.

## Member Shoutouts

**Annelle Primm, M.D., M.P.H.** won a creative scholarship award for an anthology on racism and mental health from the Society for the Study of Psychiatry and Culture. She was awarded the 2024 Creative Scholarship Award as a co-editor for the publications of "Mental Health, Racism, and Contemporary Challenges of Being Black in America." You can [read more about the anthology and award here.](#)

Johns Hopkins University awarded **Allison Brandt, M.D.** and **Russ Margolis, M.D.** teaching awards at the 2024 resident graduation dinner. Dr. Brandt (Assistant Professor) was recognized for her resident teaching, a result of her work in leading the schizophrenia case conference on Meyer 5 and Dr. Margolis (Professor) won for medical student teaching, due to his willingness, on a regular and frequent basis, to make the time to educate our most junior trainees. Congratulations to them both!

## Support for Medical Students

The MPS offers a free category of membership for medical students to help them learn more about psychiatry and connect to potential mentors. This includes access to MPS communications, interest groups, committees, and listserv. MPS membership is an invaluable opportunity for students looking to enter psychiatry. Email [mfloyd@mdpsych.org](mailto:mfloyd@mdpsych.org) to volunteer to serve as a resource to medical students.

## Resident-Fellow Members' Post-Residency Plans

**Samuel Adeyemo, M.D., MBChB** will be joining the Department of Veteran's Affairs, Baltimore MD.

**James Aluri, M.D.** will be staying on at JH as an assistant professor in the Department of Psychiatry.

**Kathryn Victoria Blair, M.D.** will continue training next year as a forensic psychiatry fellow at the University of Maryland.

**Karen M. Dionesotes, M.D., MPH** will start with Mt Sinai at their new behavioral health center on the lower east side. She will be doing outpatient geriatric psychiatry, helping to build the department, and will be the APD on the geriatric psychiatry fellowship out of the Center.

**Samuel Max Fels, M.D.** will begin a fellowship in Child and Adolescent Psychiatry at The Mount Sinai Hospital.

**Snehdeep Hanspal, M.D.** will be staying at Clifton T. Perkins as a staff psychiatrist.

**Janet W. Karanja, M.D.** will be continuing training as a child and adolescent psychiatry fellow at the University of Maryland.

**Zofia Kozak, M.D.** will be joining the staff at Sheppard Pratt.

**Lisa Kremen, M.D.** will be continuing training as a child and adolescent psychiatry fellow at the University of Maryland.

**Rachel LeMalefant, M.D.** will be starting a fellowship in Consultation-Liaison Psychiatry at the University of Washington.

**Sara M. Mahmood, M.D.** will be continuing training as a consultation liaison fellow at the University of Maryland.

**Drew Myers, M.D.** will join Bethesda Women's Mental Health as a reproductive psychiatrist. He will also be staying on at University of Maryland School of Medicine as a Clinical Instructor.

**Nana Yaa Nimo, M.D.** will be working at Northside Hospital Behavioral Health Services in Atlanta doing outpatient medication management.

**William Tobolowsky, M.D.** will be continuing on as a consult liaison fellow at Johns Hopkins Bayview & Johns Hopkins Hospital.

**Wan Rou Yang, M.D., Ph.D.** will be starting a solo private practice, Root to Summit.

## Attention Graduating Residents!

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



MARYLAND  
PSYCHIATRIC  
SOCIETY'S

**DAY AT THE BALLPARK!  
SUNDAY AUGUST 25**

**@1:35 PM**

**ORIOLES PARK AT CAMDEN YARDS**

Enjoy an afternoon of baseball and an  
all-inclusive food selection!

HOT DOGS ● POPCORN ● PEANUTS ● FROZEN TREATS  
AND MORE!

**CLICK HERE  
FOR FREE RFM  
AND ECP  
TICKETS!**

**ALL OTHER  
MEMBERS CLICK  
HERE FOR  
DISCOUNTED  
TICKETS AT  
JUST \$40!**



**Limited tickets available!**

email [JHritz@mdpsych.org](mailto:JHritz@mdpsych.org) with  
any questions



## Maryland News

### Preferred Drug List Update

The Office of Pharmacy Services (OPS) posted updates to the Maryland Medicaid's Preferred Drug List (PDL) and Brand Preferred over Generic Program, effective July 1, 2024. Please refer to their website for the complete PDL and [Brand Preferred over Generic List](#). The PDL encompassing over 1800 drugs, covers most generic formulations of preferred multisource brand drugs without a prior authorization. If the prescription for a brand name drug is to be dispensed as written (DAW6), the prescriber must complete and submit a [Medwatch form](#). The OPS clinical pharmacy team will review the Medwatch form and notify the prescriber whether the request for the brand name drug is approved or denied. The State will forward the Medwatch form to the FDA when appropriate. As a reminder, the mental health formulary [can be found here](#).

### Maryland Medicaid Prescriber Alert

Federal regulations required Maryland Medicaid to enroll all Ordering, Referring, and Prescribing (ORP) providers in the Maryland Medicaid program for their services and prescriptions to be billable to Medicaid. **Due to this requirement, as of July 1<sup>st</sup> Maryland Medicaid will deny all fee-for-service (FFS) pharmacy claims where the individual prescribing practitioner is not actively enrolled in Maryland Medicaid.**

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. Even if an individual prescribing practitioner is otherwise not required to be enrolled for submission of claims for rendered services, they must now enroll for Medicaid to reimburse pharmacies for their prescriptions under this policy. It is critical that prescribing practitioners enroll as soon as possible to ensure that Medicaid participants can continue to access the medications and services they need. Individual practitioners 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).

Prescribing practitioners can check their Medicaid enrollment status via the [Provider Verification System](#) (PVS) and enroll through Maryland Medicaid's [Electronic Provider Revalidation and Enrollment Portal](#) (ePREP). Information, guides, and FAQs related to this policy are available on Medicaid's ORP Providers [webpage](#).

### New Medicaid Fee Schedules

Effective July 1, 2024, Maryland Medicaid will increase certain Behavioral Health provider rates. Community-based behavioral health providers will receive a 3% rate increase. Optum Maryland is implementing the 3% rate updates for Behavioral Health and Applied Behavior Analysis (ABA) providers for dates of service July 1, 2024, and forward. Please note: E&M codes and labs are separately managed under Medicare rules and are updated based on the CMS rate changes. Specific buprenorphine products' rates are adjusted to align with current National Average Drug Acquisition Cost (NADAC) rates. The new fee schedules are posted to the [Optum Maryland website](#).

### Medical Assistance Program Provider Updates

The Maryland Department of Health has released updates on the Maryland Medical Assistance Program including important updates on transitioning from Optum to Carelon; Ordering, Referring, and Prescribing; and Medicaid provider enrollment for MCO self-referred services, among other important matters. Physicians and their appropriate staff are urged to review this update, which may be accessed [here](#).

### MedChi EQIP Meeting

MedChi is hosting the **Behavioral Health** Episode Quality Improvement Program (EQIP) meeting on Tuesday, July 2nd from 11:30 AM to 12:30 PM. [Register for the program here](#).

The Episode Quality Improvement Program (EQIP) will provide incentive payments to practitioners who improve the quality of care and reduce the cost of care that they provide to Maryland Medicare patients. EQIP is designed to:

- Help the State meet the financial targets of Total Cost of Care (TCOC) Model
- Include more practitioners in a value-based payment framework (that is, to have responsibility and share in rewards for reducing Medicare TCOC spending)
- Encourage multi-payer alignment in a value-based payment framework
- Include more episodes than in Centers for Medicare & Medicaid Services (CMS) Innovation Center (CMMI) models
- Broaden access to Medicare's Advanced APM (AAPM) MACRA opportunity

A short overview of EQIP can be found [here](#). If you have any questions or would like further information, feel free to reach out to me or directly or to [EQIP@crisphealth.org](mailto:EQIP@crisphealth.org).



## Maryland News

### MedChi's 2024 Physician Compensation Survey Now Open

The [Physician Compensation Survey](#) is historically one of MedChi's most talked about and eagerly awaited surveys. The last survey, produced in 2022, revealed a persistent and significant gender and racial wage gap that could not be accounted for based on medical specialty or hours worked per week. The survey showed that physicians in our state earn less than the national average, despite Maryland's high cost of living. The 2024 survey will also benchmark compensation among Maryland physicians by gender, age, ethnicity and practice status, and explore the gender pay income disparity among physicians in private practice versus those who are employed. New to the 2024 survey is a series of questions focusing on pay transparency. Please take a moment to [fill out this survey](#); the results will help us see if Maryland has made any progress in gender or racial pay disparity, and other critical issues. The results of the new survey will be made available in the coming months.

### Carelon BH Town Hall

Last month MDH and Carelon Behavioral Health hosted a virtual town hall for Maryland's providers. Here are several resources of interest to members from the meeting:

- [Slide Presentation](#)
- Webex meeting recording: [Maryland Department of Health and Carelon Behavioral Health Town Hall for Providers](#)  
—Password: Carelon2024 (You must enter this password to access the recording)

If you have any questions about the implementation after reviewing the content or beyond, please direct them to: [MDHtransitionsupport@carelon.com](mailto:MDHtransitionsupport@carelon.com)

### Maryland Children's Mental Health Matters

For twenty-five years, the Children's Mental Health Matters Campaign has been at the forefront of Maryland's efforts to prioritize and uplift the mental wellbeing of youth. Each year, the campaign unites the voices of schools and community organizations with powerful messaging dedicated to promoting mental wellbeing, dismantling stigma, and providing essential resources for prevention and support. Please take 10 minutes to [watch their short film](#) and hear directly from Maryland's youth and caregivers as they share their experiences navigating the state's behavioral health system and their hopes for the future.

### New Maryland Insurance Administration Resource

Maryland Insurance Administration launched a new resource last month to help Marylanders navigate health care coverage challenges that impact access to care. The new Health Coverage Assistance Team, known as H-CAT, will "walk with the consumer" to navigate health coverage questions or challenges, in addition to coordinating closely with other state agencies and organizations to use resources wisely and avoid duplicated efforts. H-CAT offers a particular focus on access to mental health and substance use care, regardless of whether the individual's health plan is regulated by the MIA.

The new Health Coverage Assistance Team (H-CAT) will provide direct, consistent and personal assistance, following the consumer's case from initial in-take through resolution by H-CAT or other partners. H-CAT is available to provide information, assistance, and advocacy, if needed. The approach is designed to help consumers understand health coverage plans; how they work, what is covered, and how to use the benefits and health plan processes such as care authorizations, appeals, and complaints.

Marylanders may contact H-CAT directly by visiting the [H-CAT webpage](#), via email at [hcat.mia@maryland.gov](mailto:hcat.mia@maryland.gov) or by calling 410-468-2442.

### BH Crisis Stabilization Center

Effective June 1st Maryland Medicaid will reimburse Behavioral Health Crisis Stabilization Center services and Mobile Crisis Team services. Provider transmittals regarding these services are linked below. A [Crisis Services Billing Appendix](#) has been posted on the Optum Maryland website; please note, this information will shortly be incorporated into the broader Public Behavioral Health System [Billing Appendix](#).

- [Medicaid Coverage of Behavioral Health Crisis Stabilization Center Services](#)
- [Medicaid Coverage of Mobile Crisis Team Services](#)

### Maternal Opioid Misuse Program

The Maternal Opioid Misuse (MOM) Program was created to provide case management services to pregnant enrollees with Opioid Use Disorder (OUD) that will continue for one year following the end of pregnancy. The program's success requires providers to encourage patients who qualify to enroll. They have created a toolkit that contains all informational resources for the MOM Program. Providing support to pregnant Medicaid members diagnosed with OUD will ensure access to proper healthcare for participants and their families. Learn more and access the [MOM Case Management Toolkit](#).

## APA News & Information

### APA Speaker's Bureau

APA is seeking members who are active and engaged in Component activities to be a part of APA's Speaker's Bureau. The Speaker's Bureau is aimed at diversifying and broadening APA's bench of public-facing experts. In addition to traditional media requests, APA has a number of other opportunities available for members who are willing to share their expertise. This includes writing blogs on important mental health topics, providing government testimony, and participation in social media events, like Twitter/X chats, Instagram live, and more.

Members of the APA Speaker's Bureau, as an internal influencer group, will also be asked to amplify APA's voice by promoting public education initiatives via social media and engaging during APA social media events.

Please contact James Carty ([jcarty@psych.org](mailto:jcarty@psych.org)) with any questions you may have.

### New APA CEO/Medical Director

Marketa M. Wills, M.D., M.B.A., FAPA, is the CEO/Medical Director of the APA. On June 1, 2024, she assumed the helm as the APA's eighth CEO — and became the first Black American and first woman to occupy this critical role for the 180-year professional society.

Dr. Wills is passionate about collaboration and innovation to deliver patient-centered, high quality, equitable, efficient and affordable care. Most recently, Dr. Wills served as Senior Vice President and Chief Medical Officer for Johns Hopkins Health Plans (JHHP). In her role, Dr. Wills helped JHHP optimize clinical and quality outcomes for health plan members while driving efforts to efficiently manage costs of care. She oversaw the Pharmacy, Utilization Management, Care Management, and Quality Improvement departments, as well as other areas of JHHP's Health Services division. She also helped set and enforce medical policies and standards for health care services provided to plan members. [Click here](#) to read more.

### SMI Adviser Shutting Down

APA's clinical support system for serious mental illness (SMI) is at the end of its funding and will be shut down **Monday, July 8**, at 11:59 p.m. ET. If you need to look up or download materials from the [clinician knowledge base](#), please do so by then. APA appreciates your dedication to delivering the best care to people with SMI and hopes the resource has been of value. For questions, email [SMIAdviserHelp@psych.org](mailto:SMIAdviserHelp@psych.org).

### Contribute to Psychiatric News

New Editor in Chief Adrian Preda, M.D., invites APA members to become involved in *Psychiatric News* by writing news or opinion articles on the topic of their choice or by applying for leadership positions to invite and curate articles from other members in new sections that include the areas of technology, sex and gender issues, advocacy, psychotherapy, integrated psychiatry and primary care, and consultation-liaison psychiatry. Interested? For more information, send an email to [editor@psych.org](mailto:editor@psych.org).

### Health Minds Poll: Burnout

More than 40% of employees are impacted by burnout, according to the latest Healthy Minds Monthly poll from APA and Morning Consult. Around 2/3 of those surveyed (67%) said they knew how to access mental health services through their employer. Two-in-five employed adults said they worry about retaliation or being fired if they take time off for mental health (44%) or seek mental health care (39%). You can read more about this survey and [see the full results here](#).

### APA Poll Highlights Climate Anxiety

With a prediction for an [above normal hurricane season](#) this year, wildfires causing evacuations, and tornadoes and extreme storms regularly emerging, just more than half of adults (53%) are now reporting that climate change is impacting Americans' mental health. This is up from 48% in 2022, as reported in the American Psychiatric Association's [Healthy Minds Monthly Poll](#).

This month's poll also asked how climate change was impacting people's lives, and two in five Americans reported impacts on their physical and mental health. Other aspects in which Americans were feeling climate change's impact were access to food (39%), personal finances (37%), their family (36%), housing (34%), their neighborhood (25%), their job or career (26%) or their education (24%). More than half of Americans (54%) are anxious about the way the government is currently dealing with climate change and its potential impact, including one fifth (21%) who say they're very anxious about this.

To learn more about climate change's impact on mental health, [visit the APA website](#). APA's Healthy Minds Monthly tracks timely mental health issues throughout the year, see [past polls](#).

## APA News & Information

### MHSC Registration Now Open

Join your colleagues at the Hilton Baltimore Inner Harbor hotel **September 26–28** for the next [Mental Health Services Conference](#), which brings together psychiatrists and other mental health professionals to collaborate on practical ways to influence systems-level change for their patients. [REGISTER TODAY](#)

### 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.](#)

### Are you a General Member? Become an APA Fellow!

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

### Expand Your MPS Engagement

#### 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!

#### Engage with Digital Options

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



## Medicare Updates

### 2024 MIPS Hardship Exception

Due to [continued pressure by the AMA](#) on the administration and the Centers for Medicare & Medicaid Services (CMS) about the ongoing impact the Change Healthcare cyberattack has had on physician practices, CMS has added an option to cite the cyberattack when requesting the [2024 Merit-based Incentive Payment System \(MIPS\) Extreme and Uncontrollable Circumstances \(EUC\) hardship](#) exception.

To account for the increased number of physicians that have been impacted by a cyberattack this year, CMS has specifically added a drop-down tab in the application to indicate the EUC is due to the Change Healthcare cyberattack. When in the [EUC portal](#), physicians should select the event type as “ransom/malware.” Once a physician clicks on the event type “ransom/malware” a drop-down box will appear asking whether the event pertains to the Change Healthcare cyberattack. Reference page 8 in the [2024 MIPS EUC Application User Guide](#) for more details. The 2024 MIPS EUC portal is now open, and physicians have until Dec. 31, 2024, to file a hardship application and avoid a 2026 MIPS negative payment adjustment.

When applying for a hardship, physicians have the option to request reweighting of up to four MIPS categories. Reweighting of all performance categories will result in avoiding a MIPS penalty of up to -9% in 2026. As a reminder, if a physician or group submits data, it will override the hardship exception and the physician or group may be scored.

### Medical Records Request Scam

CMS identified several new phishing scams for medical records. This may include scammers faxing you fraudulent medical records requests to get you to send patient records in response; see [example \(PDF\)](#). If you think you got a fraudulent or questionable request, work with your [Medical Review Contractor](#) to confirm if it’s real. Submit medical documentation through the [Electronic Submission of Medical Documentation \(esMD\)](#) system or CMS medical review contractor secure internet portals, when available.

### Final Rule on Nondiscrimination

Among the updates, this final [HHS and CMS issue rule](#) codifies that Section 1557 of the Patient Protection and Affordable Care Act prohibits discrimination of LGBTQI+ patients effective July 5. The rule also clarifies that the section applies to the use of patient care decision support tools such as clinical algorithms and predictive analytics.

**CLASSIFIEDS****OFFICE SPACE AVAILABLE**

Ellicott City for Mental Health Practitioners seeking a professional and inviting space. Amenities: Wi-Fi, copier, fax, waiting rooms, staff kitchen, adequate parking, and handicapped access. Comfortable and friendly atmosphere with Active in-office Listserv for referrals and consultations (40-50 current members). Easily accessible via routes 40, 29, 32, 70, and 695. Rental Rate: \$65 to \$70/day. Contact: Dr. Mike Boyle at 410-206-6070, [psycmike@gmail.com](mailto:psycmike@gmail.com) for more details.

**Special Member Rate for MPS Directory Ad**

MPS members can advertise their practice, new office location, specialty, new book, etc. for a special members-only rate of \$100 for 1/3 page in the directory. The 2024-2025 directory will be out in fall 2024, so order soon!

For details, email Jora at [jhritz@mdpsych.org](mailto:jhritz@mdpsych.org).

**Advertise Position Openings and Office Space with MPS!**

The MPS offers timely ads in [MPS News](#) (includes online post), [The Maryland Psychiatrist](#) and the MPS [home page](#). [Click here](#) for ad rates. Please help MPS generate non-dues income by using MPS ads to connect with psychiatrists.

The Maryland Psychiatric Society

**Ikwunga Wonodi Social Justice and Health Equity in Psychiatry Award**

Recognizing Residents, Fellows, and Early-Career Psychiatrists who demonstrate distinction in working toward equity in psychiatry through teaching, research, clinical work, and/or public health advocacy.

Each year, recipients will receive \$500 to support their education, research, mentorship, and cultural activities in psychiatric care for people with severe mental illness from historically underserved communities.

**Contribute to the Dr. Ikwunga Wonodi Award**

Donations are not tax deductible as a charitable contribution.

Donate Here:



[Click here](#) for award details.

Email [JHritz@mdpsych.org](mailto:JHritz@mdpsych.org) for more information





# Treatment-resistant depression meets its match.

The **University of Maryland Medical Center's Advanced Depression Treatment Center (ADepT)** assists individuals ages 18 and above who struggle with difficult-to-treat depression. This type of depression is not responsive to at least two adequate trials of traditional treatments such as antidepressants and psychotherapy.

ADepT offers a comprehensive, personalized treatment program based on a consultative model. Employing the latest treatment options tailored to patient needs, our expert team works in partnership with patients towards a unique and successful approach for Treatment-Resistant Depression.

## **SPECIALIZED CARE AND EVIDENCE-BASED TREATMENTS**

- Comprehensive diagnostic evaluations
- Advanced medication management
- Access to novel, effective, safe treatments such as:
  - Transcranial Magnetic Stimulation (TMS)
  - Intranasal Esketamine
  - Electroconvulsive Therapy (ECT)

## **HOW TO REFER**

Call **410-328-8415** to schedule a consultation.  
Visit [umm.edu/ADepT](http://umm.edu/ADepT) for more information.

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# ENDLESS POSSIBILITIES for Psychiatrists at Sheppard Pratt

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

Current openings include:

**Medical Director of Psychiatry for CalvertHealth**  
Sheppard Pratt Solutions | Prince Frederick, MD

**Psychologist, Inpatient and Outpatient Services**  
Sheppard Pratt Hospital | Towson, MD

**Psychiatrist**  
The Center for Eating Disorders | Towson, MD

Scan QR code to  
see all openings



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

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

For more information, please contact:

Emily Patrick, Director of Provider Recruitment, [epatrick@sheppardpratt.org](mailto:epatrick@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](http://sheppardpratt.org) to learn more about our services. *EOE*.



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