



West Hudson Psychiatric Society

Serving Rockland, Orange, Sullivan & Delaware Counties

10 Flitt Street, West Nyack, NY 10994 | P: (845) 893-1920

www.westhudsonpsych.org | westhudsonpsych@gmail.com

eSynapse

October 2018

Editor's Comments

James Flax, MD, MPH, DLFAPA

There are ads and announcements that may interest you, including from my malpractice insurer, PRMS. Please scroll all the way to the end to see it all. And, if you are not receiving the MSSNY eNews, here's a link where you can read about issues of interest to all of medicine in New York State: <http://www.mssny.org>.

As I've said and written many times, I **will** publish anything you'd like published. I'll add a caveat to this longstanding invitation - **if** it's suitable for the eSynapse newsletter and of relevance to our profession, our patients or about a member such as – professional opinion, recipes, personal announcements, travelogues, etc.

In the last issue of eSynapse there was an editorial letter from 5 of our members objecting to Dr. Bark's President's Column in the previous issue of eSynapse. I inadvertently left off the 5th signer of that letter, Dr. Carol Paras, due to a formatting error. I apologize to Dr. Paras and the other 4.

I want to underline the importance of the APA PAC. However much we may dislike it, this is the way American politics works. **More important than the amount of money contributed is the number and percentage of members who contribute.** Politicians want to know how many people feel strongly enough about the issue to give to the PAC. If you haven't contributed, please consider doing so. Even \$1 adds your name to the list and the number of donors. **See the form appended to the last page of this eSynapse.** I make a point of giving every year because it is the APA PAC that advocates for my interests as a psychiatrist better than any other organization.

Our website is now operational. The content will be updated over the next few months, thanks to the efforts of Liz Burnich. We prominently include a link to the APA "**Find A Psychiatrist**" database. (<http://finder.psychiatry.org>). This is a wonderful public service and can provide a source of referrals to your practice. Please join APA's **FREE** "Find a Psychiatrist" Database by signing in to psychiatry.org, under the Psychiatrist menu go to Search Directories and Databases, scroll down to Find a Psychiatrist Database and "opt-in".

Marist College and Health Quest announced that they are partnering to start a medical school set to open in 2022 on the campus of Vassar Brothers Medical Center. They expect 50 students the first year and growth to 150 students in subsequent years. It will be called "Marist College Health Quest School of Medicine".

In this issue of eSynapse you will find a summary of our Executive Council meeting so all readers will have an idea of district branch business. But, it's only a summary. Please **come** to one of our friendly meetings to appreciate the rich discussions and enjoy a tasty lunch at Il Fresco.

**Executive Council Meeting
Il Fresco Restaurant, Orangeburg, NY
Friday, November 9, 2018
Friday, January 4, 2019
PROMPTLY at 12:30**

**Please contact Liz Burnich (westhudsonpsych@gmail.com) if you are planning to attend.
IT'S A FREE LUNCH**



The WHPS probably does more for its members and for psychiatry, proportionately (considering the number of members), than any other district branch, as was recognized by the APA in awarding it the Best Practice Award this year. **For our members:** twice yearly educational dinner meetings with high quality speakers; open executive committee meetings that all members can attend with a journal club or presentation from local leaders of psychiatric services or organizations; a mentoring program for residents at Orange Regional Medical Center; a women's group of female psychiatrists that meets every six weeks; the Mental Health Coalition of Rockland County organized by Lois Kroplick 22 years ago, with about 20 local mental health organizations, has been perhaps the most active and successful undertaking by WHPS, with its highly successful annual Forum, attended by 500 or so people, its educational programs in local Colleges, elementary schools, high schools, its presentations to groups of clergy, police, Rotary clubs, PTAs; many members have been involved in these programs. eSynapse, (with news of psychiatric and WHPS activities in our area, a summary of the executive committee meeting, original articles, advertisements for jobs and offices etc) has been recognized with awards by the APA for its quality and interest. Of course if you don't read it you wouldn't know and you may not know what the WHPS does. We are involved with representing our members and patients at NYSPA and its committees and the APA on the Assembly and its committees. If you don't think we are doing enough, please join us and contribute. Nigel Bark, MD

At our July EC meeting, Ulrick Vieux, DO presented Lois Kroplick, MD with a donation made in her name to NAMI for her keynote presentation on Complicated Grief at the 1st Annual Update in Psychiatry meeting held at ORMC in March 2018.



Orange Regional Medical Center held a mentoring event for residents in July. Many of your colleagues presented highlights of their professional lives and advice about career choices



Our President, Nigel Bark, MD was honored by NAMI at their annual awards dinner on October 3rd for his lifetime of commitment to psychiatry and mental health.





Understanding and
Treating

Anxiety Disorders

Breaking the Silence
Annual Public Forum

Wednesday
October 24, 2018

A presentation and discussion for family members, educators, students, professionals and those whose lives have been impacted by mental health and/or substance abuse issues

Sponsored by

NAMI ROCKLAND

National Alliance on Mental Illness of
Rockland County

Rockland Community College
Student Development Center

Rockland County Department of
Mental Health

RDBSA/ Rockland County Depression &
Bipolar Support Alliance

West Hudson Psychiatric Society

Registration 6PM, Program 7PM



West Hudson Psychiatric Society

A District Branch of the American Psychiatric Association
Serving Rockland, Orange, Sullivan & Delaware Counties
of New York

We are pleased to announce

THE 2018 FALL EDUCATIONAL MEETING

Guest Speaker:

Leslie Citrome, MD, MPH

Clinical Professor of Psychiatry and Behavioral Sciences
New York Medical College, Valhalla, NY

Presenting the topic:

Planet of the Apps: Enabling Technology To Make You a Better Clinician

Learning Objectives:

- Participants will be able to offer tools such as CBT-I to their patients.
- Participants will be able to set up automated searches for journal articles on clinical topics of interest.
- Participants will be able to convert paper files, journal articles, and books into digital format and be able to retrieve them easily.

Goal Statement:

- Review new technologies that help clinicians treat their patients, including web-based and smart-phone based tools.
- Review new workflow tools that help clinicians keep up with the biomedical literature.
- Review means of converting paper-based resources into digital formats in a time-saving and efficient manner.

Meeting Date: Friday, November 16, 2018

Time: 6 – 9:00 PM

Location: La Terrazza Restaurant, 291 South Main Street, New City, NY

There will be a charge of \$20 per member and \$30 per non-member.

Please RSVP by November 8 by sending payment payable to
The West Hudson Psychiatric Society or WHPS,
Liz Burnich, 10 Flitt Street, West Nyack, NY 10994

**** SPACE IS LIMITED – PLEASE SEND IN PAYMENT ASAP to guarantee your spot ****

Any Questions?...Contact Liz Burnich at (845) 893-1920 or email Liz at westhudsonpsych@gmail.com

Please note: Attendees will receive 2.0 CME Credit Hours **

** The NYU Post-Graduate Medical School is accredited by the Accreditation Council for Continuing Medical Education (ACCME) to sponsor medical education for physicians. The NYU Post-Graduate Medical School designates this continuing education activity for 2.0 credit hours in Category 1 of the Physicians Recognition Award of the American Medical Association. The NYU Post-Graduate Medical School adheres to ACCME standards regarding commercial support of continuing medical education. Disclosure of any commercial relationships as well as off-label investigational use of any drug, device or procedure by the faculty will be made known at the time of the lecture.

P.O. Box 760, Nanuet NY 10954 • (845) 893-1920
westhudsonpsych@gmail.com • www.westhudsonpsych.org

President's Column

Lead: great gains but still harming children's brains

Nigel Bark October 2018

I have been interested in lead since childhood. I remember my older brother telling us, when I was about six, that we should run the tap for a few minutes before drinking the water to get rid of the lead. Shortly after that the lead pipes in our house were replaced with copper and bits of lead pipe were lying around for a long time and were a great source of entertainment: melting it in spoons to make fishing line weights and bending the pipes with strong steady pressure (demonstrating the origin of "lead-pipe rigidity"). When I was in Ireland doing pediatrics there was an epidemic of lead poisoning among the "travelling people" ("tinkers") because they made money recycling car batteries and poured the fluid on the ground and burned the left-overs where the children played. Recycling car batteries continues to be a source of lead poisoning epidemics in poor countries although lead mining and smelters are a more frequent source. Wikipedia lists 12 lead poisoning epidemics with more than 100 people affected, all in poorer countries except one in El Paso (from a lead smelter). Two were from auto battery recycling, one from lead glazed pottery and all the others from unregulated lead mining and smelters. Three were in China with several thousand people affected. Perhaps the worst was in Nigeria (Zamfara) where 163 to 400 people died and 3,180 children were treated with dimercaptosuccinic acid chelation therapy. It was caused by "cottage" mining for gold across several villages where the ore (which had a lot of lead in it) was brought home to be crushed and gold extracted.

Lead exposure can cause anemia, hypertension, renal impairment, immunotoxicity, toxicity to the reproductive organs, convulsions, coma and death. But it is the effects on the brain of even low levels that make it important to psychiatrists.

I did write about lead briefly in February in connection with pollution and psychiatry pointing out that lead and air pollution could not be the cause of the purported increase in autism and ADHD since both had gone down so much in the past 40 years. In July I wrote about the two books showing the enormous improvements that have been made in all aspects of life. Neither specifically mention lead but one (Pinker) has a graph showing that in the past 50 years the US population has gone up 50%, vehicle miles driven have gone up 150%, GDP up 200% but five emission pollutants have gone down 50%. Lead was not mentioned but it has gone down much more than that – all due to good regulations. I am coming back to it because although there has been enormous progress in reducing environmental lead it is still causing significant brain damage and there are continuing controversies: should the children of Flint be labelled 'poisoned'? Is there a safe lead level? should old lead paint be removed or painted over? does lead cause crime? In the rest of this piece I will look at the evidence for ill effects of low levels of lead: in a massive review from the National Toxicology Program, US Department of Health and Human Services and a pooled analysis of seven international population based longitudinal cohort studies done mainly in the 1990s. In the latter there were 1,333 children followed prospectively from birth or infancy until between 5 and 10 years of age. They all had lead measured repeatedly, IQ measured around age seven, and the possible confounders were known: site, birth weight, birth order, maternal age, maternal IQ, maternal education, prenatal smoking and alcohol use, a measure of the home emotional and cognitive stimulation, among others. The median peak blood lead level was 18ug/dL at age 2.5 years. By 5-7 years the median lead level was 9.7ug/dL. The IQ did correlate with most of the confounders but not with the child's sex or prenatal alcohol use, or, in the US, with race! A log-linear model fitted the correlation best with a decrement of 6.9 IQ points

for an increase in concurrent blood levels from 2.4ug/dL to 30ug/dL (the 5th to 95th percentiles). (*Concurrent* [at the time of IQ measurement] blood levels were the most highly correlated with IQ, compared with peak or mean levels.) But the greatest decrements were at the lowest levels: 3.9 IQ points at 2.4 to 10ug/dL, 1.9 points at 10-20ug/dL and 1.1 points at 20-30ug/dL. Similarly the IQ loss was significantly greater 0-7.5ug/dL than 7.5 to 40ug/dL.

It is of interest that the mean concurrent lead levels (ug/dL), and IQs, varied enormously between sites: Boston: IQ 116, lead 5.4; Cincinnati: IQ 87, lead 7.5; Cleveland: IQ 87, lead 14; Rochester: IQ 85, lead 4.0; Mexico City: IQ 108, lead 7.0; Port Pirie, Australia: IQ 106, lead 13; Yugoslavia IQ 74, lead 16. The overall effects did not depend on any one site.

The other document was the report from the National Toxicology Program, US Department of Health and Human Services on US health effects of low-level lead, published in 2012. This showed “sufficient evidence” (“an association...in which chance, bias and confounding could be ruled out with reasonable confidence”) that: in those children with less than 5ug/dL the lead level was correlated with decreased academic achievements, decreased IQ, increased attention related behaviors and increased problem behaviors; and in those with less than 10ug/dL the lead level was correlated with delayed puberty, reduced potential growth, decreased IQ and decreased hearing; in adults in those with less than 5ug/dL the lead level was correlated with decreased glomerular filtration rate and reduced fetal growth in pregnant mothers; and in those with less than 10ug/dL lead level was correlated with increased blood pressure and increased essential tremor. There was “limited evidence” (“chance, bias and confounding could not be ruled out with reasonable confidence”) of a number of additional adverse effects.

There is a wonderful prospective cohort study from Dunedin, New Zealand. It is the Dunedin Multi-disciplinary Health and Development Study which has been following people for over 45 years from their birth in 1972-3. (This is the study that demonstrated that smoking cannabis at age 15 is associated with three times the risk of schizophrenia spectrum at 28, but not in those with the met/met allele of the COMT gene and only double the rate in the met/val alleles.) In this cohort blood lead was measured at age 11 and correlated with IQ at age 11 and age 38. Each 5-ug/dL increase in blood lead level was associated with a 1.6 lower IQ score at 38. A level over 10ug/dL at 11 was associated with a reduction of 2.7 points in adult IQ and 1.7 points at age 11. It was also significantly associated with lower socio-economic status at age 38 although at age 11 the lead level was *not* correlated with social-economic status, which is most unusual. Socio-economic status has usually been considered a confounder and “corrected for” but maybe should be considered a result explicable by the fact that lead is also associated with decreased executive functioning, impulsiveness, disorganization and substance abuse. At age 11 lead level was significantly related to inattention, impulsivity, hyperactivity and behavioral problems.

To demonstrate the progress we have made the mean blood level in this New Zealand study at age 11 (1984) was 11ug/dL with 94% over the current reference value of 5ug/dL; similar to the USA at that time where the mean was 15ug/dL with 88% over 10ug/dL. Reduction in lead has been remarkable: now the mean level in the US is 0.84ug/dL; 2.5% of children have levels over 5ug/dL. Removing lead from gasoline, paint and solder has dramatically reduced the population exposure, with an estimated increase in mean IQ in American adults of 4.5 points (some say 10 points) in about 40 years. In Flint, Michigan, the number doubled with levels over 5ug/ml: it went from 2.4% to 4.9% (10.6% in the worst area) leading to the crisis! No children in Flint had levels above 45ug/dL which is the level above which medical treatment is recommended. The mean blood lead level in Flint after the change in water source was 1.3ug/mL up from 1.19 in 2014 before the change, a rise of 0.11ug/dL. It had been 2.33 in 2006 and had risen by 0.12ug/mL in

2011 for no apparent reason. There were a lot of government and administrative delays and errors but once the problem was noted and accepted the provision of bottled water prevented serious harm to children.

But half a million children in the USA do have lead levels over the “reference level” of 5ug/dL leading to an estimated IQ deficit of about 6 points and these are mainly in poor and minority areas. The CDC is proposing to lower this “reference level” to 3.5ug/mL; the level above which warrants public health action, close monitoring or case management.

An interesting hypothesis is the association of lead with murder and violence. Lead clearly can cause lowered IQ, impulsivity, ADHD which are themselves associated with increased crime. There are strong correlations between lead levels and the decrease in crime over the past 30- 40 years. However correlation is not causation; the New Zealand study mentioned above did not show any correlation between lead at age 11 and criminal offending up to the age of 38. There are so many other contributions to crime that I think it must remain a hypothesis awaiting further evidence.

We don't know what the safe blood level of lead is, if there is one, but from the evidence above it is clearly way below 5ug/dL. If there is a J-shaped curve (more is bad but too little is also bad: think of iron, vitamin D, radiation) for lead, as there is for most other substances, the curve of the J appears to be below the usual measurable lower limit of about 1ug/dL.

In conclusion any measurable level of lead is harmful. We have made enormous strides in reducing lead but still hundreds of thousands of people have dangerous amounts of lead in their bodies. There is much work still to be done.

Minutes of the WHPS Executive Council Meeting Friday, September 21, 2018 12:30pm - Il Fresco

Attendees Present: Nigel Bark, Raj Mehta, Laura Antar, Jim Flax, Mona Begum, Lois Kroplick, Nick Batson, Russ Tobe, Stephanie Kuntz and Liz Burnich

1. Opening Discussion:

- a. In lieu of Journal Club or a guest presenter from our community, we had a thoughtful discussion about the recent Letter to the Editor written by some of our members regarding their dissatisfaction with the content of the President's Column in our June newsletter. All agreed that the discussion of politics is likely to bring out strong opinions and divisions amongst people of varying political persuasions. These differing opinions often spur healthy discussions and conflict. The writers of the recent Letter to the Editor questioned the appropriateness of bringing the discussion of politics into eSynapse. Historically, the President's Column has always been an opinion article, oftentimes discussing controversial topics in the field of psychiatry. Our President voiced his concerns about how psychiatric services will be affected under the current administration. This column was not written to offend our members with differing opinions nor was it intended to represent the voice of the West Hudson Psychiatric Society.

2. Fall 2018 Educational Meeting Planning:

- a. Ulrick Vieux has reached out to Dr. Solhkhah of Hackensack University

Hospital to present on the topic of addiction psychiatry but is still waiting to get a commitment. Because we are running short on the time required to plan this event, Ulrich will try one more time to reach out to him and if he doesn't hear back, Raj will reach out to other speakers. We hope to be able to get a speaker commitment by the end of September.

3. Recap of 2018 Rockland County Senior Fair Event sponsored by Senator Carlucci
 - a. On August 23, Nigel Bark and Liz Burnich manned a table at the Senior Fair. This was an extremely well attended event with almost 100 presenters/vendors. Most seniors who visited our table were looking for referrals to psychiatrists in Rockland County who accept Medicare.
4. Committee Updates:
 - a. NAMI Awards Dinner is scheduled for Oct 3. Our President, Nigel Bark will be one of the honorees at this event.
 - b. Public Forum – scheduled for Oct 24 at RCC on the topic of Anxiety. Psychiatrist volunteers are needed. Stephanie will reach out to the Residents and get back to Lois Kroplick with a list of volunteers. Anyone else looking to volunteer to contact Lois at DrKroplick@aol.com.
 - c. The next Women's Meeting is scheduled for Fri 9/28 12:30 at Diane DiGiacomo's office
 - d. We will reach out to our lobbyists for guidance on next steps as we refocus our Legislative efforts.
5. Upcoming NYSPA/Area 2 meeting:
 - a. Please note that the date and location have changed.
 - b. It is now Saturday, October 20, 2018 and it is moved back to the LaGuardia Marriott Hotel on Ditmars Blvd, East Elmhurst, NY.
 - c. Committee Meetings start at 9:30am and ALL members are welcome to attend.
6. 2019 Planning
 - a. We discussed the need to identify more leaders for our district branch in 2019.
 - b. We also discussed trying to test videoconferencing technology to connect our Orange and Rockland County board members to lessen the time and travel commitment in attending our EC meetings.
7. NEXT Executive Council MEETINGS:
 - a. Friday, November 9, 2018 at 12:30 at Il Fresco, Orangeburg
 - b. Friday January 4, 2019 at 12:30pm at Il Fresco, Orangeburg

CORRESPONDENCE

None this issue.

ANNOUNCEMENTS AND ADS

The Orange Regional Medical Center (ORMC) GME program is growing exponentially. They anticipate that starting July 1 they will have 73 residents in their 6 GME programs. As a result, the need to be able to refer at risk residents to effective, empathic mental health professionals is great. Due to confidentiality issues many residents may not feel comfortable receiving treatment at Orange Regional Medical Center. ORMC would like a list of therapists that would be willing

to see residents as needed. The director of the psychiatric residency program would like to get a list of members of the West Hudson Psychiatric Society that would be willing to see ORMCM residents in their private practices. Insurance is Blue Cross/Blue Shield of NY, with varying levels of reimbursement depending on which plan the resident chooses. Please contact:

Ulrick Vieux DO, MS
Psychiatry Residency Program Director/ORMC
Cell #: 845-741-4990/Office #: 845-333-1763

APA NEWS & NOTES FOR DB/SAs



News and Notes for APA District Branches/State Associations, October 2018

Want to keep up with APA in between newsletters? Connect with us on [Facebook](#), [Twitter](#) (@APAPsychiatric) and [LinkedIn](#) for the latest news and updates.

What's New at the APA

- APA has been awarded funding to develop mental health and substance use quality measures as part of the Centers for Medicare and Medicaid Services' (CMS) Quality Payment Program (QPP). You can read more about the CMS QPP grant [here](#).
- APA joined with 6 other health organizations in filing suit in the U.S. District Court for the District of Columbia to invalidate the short-term, limited-duration insurance (STLDI) plan rule issued last month by three federal agencies. You can read more about the lawsuit [here](#).
- APA and America's Frontline Physicians issued a joint statement opposing the Trump Administration's "public charge" proposal. The proposed regulation widens the scope of programs considered by the government in making such a determination and dramatically lowers the bar for refusing admission or denying individuals green cards or U.S. visas on this basis. You can read the full joint statement [here](#).

Mark Your Calendar

- Breast Cancer Awareness Month (October)
- "Talk About Your Medicines" Month (October)
- SIDS, Pregnancy & Infant Loss Month (October)
- Domestic Violence Awareness Month (October)
- Patient-Centered Care Awareness Month (October)
- Bullying Prevention Month (October)
- Mental Illness Awareness Week (Oct. 7-14)
- Depression Screening Day (Oct. 4)
- Lock Your Meds Day (Oct. 23)

October Course of the Month - Major Depression in Children

Recent research suggests that the Child Behavior Checklist (CBCL) Anxiety/Depression scale can help identify children at highest risk for pediatric major depression (MDD) and, if implemented clinically, could cost-effectively screen children and identify those most in need of early intervention. This presentation provides an overview of MDD in children and articulates the use of the CBCL to identify children at greater risk for depression. Presented by Kenny Lin, M.D. of Massachusetts General Hospital. [Click here to access the Course of the Month and sign up for updates about this free member benefit.](#)

Earn AMA PRA Category 1 Credit™ With APA's Cultural Competency Curriculum

You can earn AMA PRA Category 1 Credit™ while learning to best practices to serve diverse patient populations through the online cultural competency resources in [APA's Learning Center](#). The Cultural Competency Curriculum is designed to help psychiatrists provide care that matches their patient's cultural needs, an essential component of effective and responsive health care delivery. You can view the full slate of online cultural competency courses [here](#).

Join a Minority and Underrepresented (M/UR) Caucus Today

APA members can join M/UR Caucuses by [updating caucus memberships in the member dashboard](#). These caucuses provide networking opportunities, advance treatment of minority patient populations, advocate for minority mental health issues, provide representation in APA governance, and foster communication among members who share interests. Membership in caucuses is free and reserved for APA members, and members may enroll in more than one M/UR caucus.

There are caucuses in the following groups:

- American Indian/Alaska Native/Native Hawaiian
- Asian-American
- Black
- Hispanic
- International Medical Graduates
- LGBTQ
- Women



refer a colleague

FOR EVERY REFERRAL, **WE DONATE TO MENTAL HEALTH**



Refer a psychiatrist or behavioral healthcare group practice to PRMS and we will make a donation to the mental health organization of your choice, including your state psychiatric association!

**HELP US TO ADVANCE ISSUES AND
AWARENESS IN THE FIELD OF PSYCHIATRY!**

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(800) 245-3333

TheProgram@prms.com

Mental Health Works is an interesting APA publication addressing mental health and the workplace. If you don't get it, I suggest you find it at the following website and see what you think.
<http://www.workplacementalhealth.org>

If you missed the dinner meeting on genetic testing for psychiatrists, here is a link to the slides from the talk by Jay Lombard, MD, the founder of Genomind.

<https://www.dropbox.com/s/ullqriwoa37njgz/Genomind%20presentation.pptx?dl=0>

At the spring dinner meeting Dan Iosifescu presented a comprehensive review and discussion of therapeutic strategies for treatment resistant depression. A copy of his slides is available here:

<https://www.dropbox.com/s/qbp3bwczqti8dqq/WHPS%2C%20Iosifescu%204.20.18.pdf?dl=0>

USEFUL INFORMATION RESOURCES: Dr. Ferro recently advised me of a useful electronic publication of psychiatric advice – SimpleandPractical.com. This prompted me to think of all the publications I use to keep up to date. I do not use UpToDate.com though I understand it is very useful. I do use the APA publications, including Focus. I am a member of the listservs of Columbia University and multiple PsychoPharm listservs. I receive Amadeo on 4 different topics <http://m.amedeo.com> and Evidence Alerts <http://plus.mcmaster.ca/EvidenceAlerts/> for reviews of recent articles. I pay for The Medical Letter. I read APA News, Psychiatric Times and Clinical Psychiatry News. I sometimes will read Psychiatric Annals as well. I use Epocrates, Google, Wikipedia, WebMD and others daily. As a result of our modern digital resources, I'm thinking of throwing out all the ancient textbooks taking up space on my shelves. I'd be interested in hearing from others about what resources you rely on to keep up to date.

GoodRx – a plug for this service I have found useful for patients whose medications are not well covered by their insurance. Sometimes it provides very beneficial coupons and lists the least expensive retail source for a medication.

PRIVATE PRACTICE FEES: Here is a link to a legal public site where you can look up fees for a given zip code. <http://www.fairhealthconsumer.org/>

PRIOR AUTHORIZATIONS If you are frequently bothered with cumbersome and seemingly unnecessary requests for prior authorizations, the APA is eager to hear from you: Ellen Jaffe, Director, Practice Management HelpLine/Medicare Specialist, Office of Healthcare Systems and Financing, American Psychiatric Association, (703) 907-8591 ejaffe@psych.org Practice Management HelpLine (800-343-4671) - email at hsf@psych.org. Also, one of our members posted to an international list-serv with regard to any denial of benefit, so I quote Dr. John Fogelman:

The URL below will direct you to a database for the regional CMS (Centers for Medicare and Medicaid Services) headquarters. The names of the regional Medical Directors are listed. When you call, hang in through all the options, and at the end type in the name of the medical director. You will get either the real live doc, an assistant, leave a message, or the name of someone to call for in an emergency. It usually works.

http://www.cms.gov/Medicare/Medicare-Fee-for-Service-Payment/sharedsavingsprogram/Regional_Contacts.html

My experience has been that the higher you go in any organization (hospital, government, insurance companies), the closer you are to the decision maker,

and the decision makers do not have to stay on the unvarying mindless script. They do not instruct you to have a good day, apologize for your inconvenience, thank you profusely and hear how they know how valuable your time is. They usually listen, and if you do not scream at them, a favorable result often follows.

PARITY ENFORCEMENT FROM NYSPA: If you missed the NYSPA Webinar on parity I strongly suggest you listen to it; accessible on the NYSPA website. Seth Stein and Rachel Fernbach have presented a packet of wonderful new tools that potentially will allow us to better manage and respond aggressively to insurance company efforts to restrict care. **THIS IS IMPORTANT!** NYSPA is soliciting detailed information on insurance reimbursements to identify fee and reimbursement discrimination in the payment for outpatient mental health services. **The NYSPA Parity Enforcement Project (PEP)**

NYSPA is rolling out its newest Parity Enforcement Project initiative to identify fee and reimbursement discrimination in the payment for outpatient mental health services. NYSPA has prepared two Request Forms - one for in-network services and one for out-of-network services - and a set of instructions for using the Request Forms. You will note that the instructions have been prepared for use for non-psychiatrists because these forms can be used by anyone who has health insurance through a job, through ACA or a Medicare or Medicaid managed care plan. We urge every psychiatrist who has health insurance coverage to submit either an in-network form or both forms (if you have out-of-network coverage). Anyone with health insurance can submit the forms regardless of whether they have received, are receiving or expect to receive treatment for mental illness. The forms do not require the disclosure of any individual medical information and the responses will not include any medical information. These forms can be widely disseminated to individuals receiving treatment and support groups for patients. The key is that NYSPA needs to review the responses in order to identify evidence of discriminatory coverage. The forms can be downloaded from the NYSPA website by [clicking here](#). Please join us in participating in this effort to identify and root out reimbursement discrimination in the treatment of mental illness.

PLEASE MAKE EVERY EFFORT TO RETURN PHONE CALLS. EVEN IF YOU HAVE NO ROOM IN YOUR SCHEDULE FOR NEW PATIENTS: I have frequently heard complaints about patients leaving voice mails with psychiatrist's offices and never getting a return phone call. If true, this reflects very poorly on our profession.

Mandatory Prescriber Education in NY after 7/1/17

Prescribers licensed in New York to treat humans and who have a DEA registration number to prescribe controlled substances, as well as medical residents who prescribe controlled substances under a facility DEA registration number, must complete at least three (3) hours of course work or training in pain management, palliative care, and addiction by July 1, 2017.

Practitioners must notify the Department of Health that they have completed the educational requirements by submitting an attestation online.

Click on the following links for more information and guidance.

- [Mandatory Prescriber Education Guidance](#) (PDF)
- [Frequently Asked Questions - Updated June 2017](#) (PDF)
- [Attestation Process](#)
- Prescribers can access three hours of free course work covering the eight required topic areas, sponsored by NYSDOH, from the University of Buffalo* at [Opioid Prescriber Training Program](#).

Weekend Psychiatry/Psychotherapy Office for Rent

Route 45, Pomona, Shared Waiting Room, Wheelchair Accessible, Wall-to-Wall Windows,

- Private Bath, Full Sound Insulation, Separate Entrance/Exit
 - Call Lorraine Schorr (845) 354-5040
-

• Depression Support Group

- Depression support group meets 2 times a month in Pomona, NY. We are inviting new members at this time. We are moderated by a clinical social worker. This is not a therapy group but social support for people fighting depression. Call Kathy for more information (914) 714- 2837.
-

**Welcome to the Rockland County
Chapter of the Depression and Bipolar
Support Alliance Come join
our Mood Disorder, Friends &
Family and Under 30 share
groups on Thursday nights** from 6:30 to 8:30 pm
We've been there. We

can help. Together we share and seek understanding and acceptance of the situations surrounding Bipolar Disorder, Depression, other Mood Disorders and Dual Diagnosis. Through frank and open discussion, compassion, real and true support, the members of the Rockland Chapter of DBSA have come together to create a cohesive unit that is vibrant and alive and offers hope and the means to help people help themselves. This group should be a welcomed part of your wellness program, and if you are a family member, or friend of an individual dealing with a Mood Disorder the same applies.

**Peer-to-Peer support is a proven
path to recovery and wellness.** If you
are looking for a place, for people who truly want to help you help
yourself to change your life, waste no more time, look no further,
we'd love to meet you.

are held from 6:30 to 8:30 pm at **Dominican
College Forkel Hall, 470 Western Highway, Orangeburg, NY 10962**

**Any questions contact: Tony at 845-422-2084 or
Brian at 845-300-1343 Email us at: dbsa.rockland@gmail.com** To
learn more about our next meeting, or to RSVP, please [visit our group on
Meetup.com](#). There is no fee for attending the support group.

NEW YORK STATE PSYCHIATRIC POLITICAL ACTION COMMITTEE, INC.
400 GARDEN CITY PLAZA, SUITE 202
GARDEN CITY, NEW YORK 11530

Name: _____

Address: _____

Tel. No.: _____

I hereby join as a member of the NYSP-PAC for 2016 and enclose my payment in the following amount:

_____	General Member	\$100.00
_____	Contributing Member	\$150.00
_____	Supporting Member	\$200.00
_____	Sustaining Member	\$250.00 or more
_____	Other amount	

Circle one:

VISA MASTERCARD AMEX DISCOVER

I hereby authorize the charging of my credit card.

Account #: _____

Three or four digit number following account number that appears on signature bar on reverse side of credit card:

Expiration Date: _____

Signature: _____

Please make checks payable to NYSP-PAC.

Checks can be mailed to:
NYS-PAC, 400 Garden City Plaza, Ste. 202, Garden City, NY 11530