



West Hudson Psychiatric Society

Serving Rockland, Orange, Sullivan & Delaware Counties

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eSynapse

March 2018

Editor's Comments

James Flax, MD, MPH, DLFAPA

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 a meeting to appreciate the rich discussions. There are comments by our President, Dr. Nigel Bark. Dr. Abdullah has again sent us a new article in his long line of erudite essays, this time a humorous reminder about documentation. 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>.

I invite all readers to submit anything they'd like published – professional opinion, recipes, personal announcements, travelogues, etc.

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 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".

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>

Executive Council Meeting
Il Fresco Restaurant, Orangeburg, NY
Friday, March 23rd, 2018
PROMPTLY at 12:30
Journal Club by Dr. Bark. followed immediately by Business Agenda
Please contact Liz Burnich (westhudsonpsych@gmail.com) if you are planning to attend.
IT'S A FREE LUNCH

President's Column

Autism, Psychiatry and Pollution?

Nigel Bark February 20, 2018

I am on an APA Assembly committee looking into the effects of pollution and chemicals on psychiatric conditions. It is an important subject but also remarkably difficult to know what is true. It is an area with strong views, powerful advocacy and much polemics. And now politics is involved because pollution and chemicals are regulated by the Environmental Protection Agency which President Trump and Scott Pruitt have decimated (or reformed, depending on your point of view). It is an area where sweeping and wrong conclusions have been drawn from animal studies using enormous doses or from the mere presence of a chemical in the human body – which is not meaningful by itself when we can measure a single molecule in a billion. And, where associations have been treated as causation. (An example of the absurdity of this: the increase in autism correlates almost perfectly with the rise in organic food sales!)

As a relevant aside the left and right in general have very different views of several scientific areas. The right tends not to accept the overwhelming scientific evidence for anthropomorphic global warming and has doubts about evolution. The left tends to dismiss the overwhelming evidence for the safety of GMOs, tends to be suspicious of fertilizers & pesticides, to use organic foods despite no evidence that they are any safer, to not recognize the enormous advances in agriculture that have enabled the world & US, populations to double in the past 50 years with a reduction in the number starving, and in the USA using less land for agriculture while exporting more food.

The Assembly Committee, of which I'm a member, used as its starting document "Project TENDR: Targeting Environmental Neuro-Developmental Risks. The TENDR Consensus Statement." (Environmental Health Perspectives 2016:124(7) A118-A122). This is a compendium of studies of pollutants & chemicals affecting the brain & neurodevelopment and a call to action by a group of scientists, health professionals and advocates. Unfortunately, in my opinion, it starts off with a series of eye-catching but unsupported statements: that learning disabilities, autism and

ADHD have increased dramatically in the past few years; that toxic chemicals in the air, water, food and consumer products have increased; and that the latter caused the former.

My experience and review of the literature suggest that we really do not know if the increase in autism or ADHD is real or is a result of recognition and a change in diagnostic habits. Nearly all the evidence for increases is from reports of treatment numbers. These undoubtedly have increased enormously as States and School Districts increasingly provide services. There has been a significant decrease in intellectual disability diagnoses over the same period and there is good evidence of diagnostic substitution – though how much is debated; and good evidence that diagnosis at a much earlier time contributes to the apparent increase. When I worked in a large intellectual disability service a few decades ago half the patients were autistic – but never diagnosed as such. Another piece of evidence for distortion in diagnostic practices is that there is still a very large over-representation of higher socio-economic families with autism. ADHD also is diagnosed more often than it used to be. I have watched the dramatic change in the acceptance of the diagnosis in Britain in the last two decades. I believe the condition was there all along. There are now good epidemiological studies of ADHD that show higher real rates than are reported in Europe, with no evidence of a real increase.

In the last issue of eSynapse I talked about the epidemiology of schizophrenia. I think the schizophrenia studies are on the whole very good and we do really know a lot about the rates and risk factors of schizophrenia. I wish we had similar epidemiological studies in autism. There are almost no studies suggesting environmental chemicals are risk factors for schizophrenia (though some suggestive animal studies and urbanicity could be mediated this way). Many of the known risk factors for autism are the same as for schizophrenia. Yet because autism (and ADHD) rates appear to have increased so much recently people have looked for explanations and turned to environmental chemicals, pollution and pesticides.

It is true that there is good evidence that lead, mercury, polychlorinated biphenyls and organophosphates during pregnancy are associated with both lower IQ and autism. However, the levels of most of these have been reduced in the past decades, as has air pollution in general since the clean air acts of the middle of the last century. Pollution remains much more in poor areas – yet these have lower rates of autism. Reduction in lead is particularly remarkable: in the USA. In the late 1970's the mean blood lead level was 15ug/dL with 88% over 10ug/dL. Now 2.5% of children have levels over 5ug/dL. In Flint, Michigan the number doubled from 2.4% to 4.9% (10.6% in the worst area) leading to the crisis! Removing lead from gasoline, paint and solder have dramatically reduced the population exposure with an estimated increase in mean IQ in American adults of 4.5 points. Yet half a million children have lead levels over 5ug/dL leading to an estimated IQ deficit of about 6 points. Those reductions in air pollution and lead resulted from regulations promulgated and enforced by the EPA. No wonder there is concern about the relaxing of standards.

There is a need for constant vigilance. In Britain regulations encouraging diesel over gasoline (because it was thought to be safer) have led to new London smog, (though still nothing like the killer smogs of the 1940s and 50s), high levels of nitrogen dioxide and new health hazards.

Just to emphasize the importance of dose: most beneficial things have a J shaped harm curve: for example iron, essential minerals, vitamin D, alcohol, radiation (made us human, cancer rates are lower in those who live in homes with radon). That is, too little is bad and too much is bad. And of course, the harmful dose for many of these is lower in the developing brain. I am not saying a little bit of any chemical is good. I am saying just because a lot is bad does not necessarily mean

that a little bit is also bad. However with lead it is generally assumed that there is no safe level. At any rate if there is a J-shaped curve, it is below the lower measurable level of 1ug/dL. PCB is an example of the importance of dose. Major health problems have been found in workers in factories where PCB was made or used extensively without proper precautions. No problems have been demonstrated from the levels of PCB found in the Hudson River.

It seems to me there is a middle ground for the EPA. Chlopyrifos is an example of the current EPA's actions: a very important pesticide for agriculture that the Obama EPA was preparing to ban and the current EPA has reprieved. But it had been banned from indoor use by the Bush EPA because of its dangers. And, when it spreads into communities from crop-dusting it has been associated with lower intelligence, tremor and autism. Surely some regulations (and technology) could be found to ensure it could be applied safely without letting it contaminate neighboring communities. That list of chemicals above shown to affect neurodevelopment, and others affecting health, need regulating and study; as do possible causes of global warming. This is the duty of the EPA for the good of the world and its people.

These are difficult and contentious times. Good studies must be done of the effects of chemicals and other factors on the developing brain. We must keep an open mind; get the facts; read the literature critically and skeptically; try and limit our political biases; but speak out when we have to.

Minutes
WHPS Executive Council Meeting
Friday, February 9, 2018
12:30pm - Il Fresco

Attendees Present: Nigel Bark, Mona Begum, Raj Mehta, Laura Antar, Jim Flax, Lois Kroplick, Dominic Ferro and Liz Burnich

1. Spring 2018 Educational Meeting:
 - a. Dr. Altha Stewart, APA President Elect has agreed to present on a topic of her choice on Friday March 9, 2018 at La Terrazza in New City.
 - b. Still awaiting topic and objectives from Dr. Stewart in order to send out the flyer.

2. Legislative Efforts:
 - a. Liz contacted Senator David Carlucci's executive aide, Cathy Oteri, regarding setting up a meeting with Senator Carlucci at the Rockland County District Office in New City.
 - b. She offered the following dates: Thursday Feb 15 at 2pm, Thursday Mar 1 at 11am and Friday Mar 9 at 12noon
 - c. The Friday March 9th date worked best for most so we would like to request that date.
 - d. She also asked that we email her a list of meeting attendees and proposed agenda.
 - e. We discussed the following agenda items/areas of concern:
 - i. To understand Senator Carlucci's mental health agenda

- ii. To establish a point person at West Hudson that Senator Carlucci can turn to when mental health matters/issues arise
 - iii. To discuss local mental health concerns - some of which are shrinking of mental health services at both the state and county level, shortage of beds in the area for children and adolescents, parity issues, psychologist prescribing concerns and SAFE Act.
 - iv. To maintain a regular relationship with Senator Carlucci via quarterly meetings
 - v. Invite Senator Carlucci to present at our next board meeting/luncheon (Friday, March 23 at 12:30pm) or a future board meeting TBA.
 - f. Liz will invite Richard Gallo/Jamie Papapetros of Richard Gallo & Associates to accompany us to the meeting and/or offer suggestions for the agenda.
3. Committee Updates:
- a. Public Forum Update – Lois Kroplick, DO
 - i. Planning has begun on the 2018 Public Forum – trying to establish the best time for planning meeting and identify dynamic speakers.
 - b. Women’s Meeting – Mona Begum, MD
 - i. The next meeting will take place on Friday, March 2, 2018 at 12:30pm at Alex Berger’s home.
 - c. Legislative Committee – Russ Tobe, MD
 - i. See above on setting up meeting with Senator Carlucci
4. APA Best Practice District Branch Award:
- a. Nigel would like to apply for this award.
 - b. Thanks to Jim and Lois for their submissions.
 - c. Please get all best practice submissions to Liz and Nigel by February 19th so that we can prepare the application by its March 1st submission deadline.
5. ORMC Residency Update:
- a. 1st Annual Update on Psychiatry – Ulrick Vieux, DO
 - i. Scheduled for Thursday March 8 in Middletown
 - ii. Lois will be presenting on the treatment of Complicated Grief
 - iii. Would like to establish a formal Mentorship luncheon with our Mentors and the Residents during the Resident’s Orientation in early July.
6. 2018 PRMS Partnership Agreement:
- a. Liz discussed doing a risk management meeting in June this year so that we are not so rushed in getting it scheduled.
 - b. Everyone agreed that having the meeting on a Friday evening will be better attended.
 - c. Liz will start coordinating with PRMS
7. Upcoming NYSPA/Area 2 meeting:
- a. Saturday, March 24, 2018 – *** Mark your calendar ***
 - b. Nigel, Laura and Lois plan to attend

- c. NOTE: the location this year has changed to the **LaGuardia Plaza Hotel**, 104-04 Ditmars Blvd., East Elmhurst, NY
 8. Upcoming 2018 APA Annual Meeting:
 - a. May 5-9, 2018 in New York City.
 - b. Registration is open on the APA website Psychiatry.org
 9. NEXT EC MEETING – Friday, March 23, 2017 at 12:30 at Il Fresco
 - a. Nigel will present for our Journal Club at the beginning of the meeting
-

CORRESPONDENCE

(Editors note: I vowed when I started this publication to publish anything sent to me by our members. Please do so.)

I received the following from **Syed Abullah, MD**. For decades Dr. Abdullah has been sending Synapse articles of interest to our local psychiatrists. Thank you, Syed, for **all** your contributions. J Flax, MD.

Humor Under Duress

Physicians are notorious for their poor penmanship in writing clinical notes and medical reports. These have been topics of endless jokes in the lay and medical literature. In recent times doctors are being called upon to mend their ways in this regard or face some serious consequences. With increasing access to medical records by the regulatory agencies, and the undermining of the provisions of patient/doctor confidentiality, the medical ‘providers’ are under increasing pressure to make their notes tidy and conforming to the standards set by the HMOs and other third party payers.

We are being warned that we may be charged with fraud and abuse if we do not adequately document the services that we submit claims for payment. HCFA has named psychiatry as the number one target for the investigation of this nature. The False Claims Act threatens civil penalties of thousands of dollars for not documenting, in a proper format, the services rendered during a visit. The False Claims Act specifically states that no proof of intent to defraud is necessary to prove a false claim. HCFA’s new documentation standards, especially those for the “Evaluation and Management” codes are extremely complex and baffling. It is difficult to imagine how busy physicians will be able to comply with the details of these requirements. And yet, the failure to do so may expose a perfectly ethical and honest physician to charges of fraud and abuse.

HCFA has reported to Congress that every \$1 spent investigating health care fraud will result in the recovery of \$28! The department of Justice and the Office of the Inspector General, which investigate and determine the penalties, get to keep the money recovered,

which is an incentive to identify the ‘abuses’ based on the insufficiencies of the documents.

These developments have caught the doctors in a state of unpreparedness. The Wall Street Journal of January 27th, 1999 has given a listing of some of the omissions and commissions doctors commit in writing the charts. This list, which is a partial one, was collected from the records that were scrutinized by some of the HMOs. Their humor is enjoyable as well as a reminder for us to take our notations on charts seriously. Some private entrepreneurs have appeared on the scene to teach doctors, for a hefty fee, how to fulfill the documentation requirements mandated by HCFA!

Here is a sampling of the careless mistakes that doctors are used to making:

“The patient had waffles for breakfast and anorexia for lunch.”

“She stated she had been constipated most of her life until 1989 when she got a divorce.”

“The patient was in his usual state of good health until his airplane ran out of gas and crashed.”

“I saw your patient today who is still under our car for physical therapy.”

“The patient lives at home with his mother, father, and pet turtle, who is presently enrolled in day care three times a week.”

“Bleeding started in the rectal region and continued all the way to Los Angeles.”

“Both breasts are equal and reactive to light and accommodation.”

“She is numb from her toes down.”

“Exam of genitalia was completely negative except for the right foot.”

“While in the emergency room, she was examined, X-rated and sent home.”

“The lab test indicated abnormal lover function.”

“The patient was to have a bowel resection however, he took a job as stockbroker instead.”

“The baby was delivered, the cord clamped and cut, and handed to the pediatrician - who breathed and cried immediately.”

“Coming from Detroit, this man has no children.”

“Exam of genitalia reveals that he is circus sized.”

“Examination reveals a well developed male lying in bed with his family in no distress.”

“The skin was moist and dry.”

“When she fainted her eyes rolled around the room.”

I hope the above quotations will cause some chuckles as well as prove to be consciousness raising to our beleaguered friends. In the above examples, the psychiatric charts were spared scrutiny. We hope that in future investigations such comments as: “The patient had committed suicide twice before.” will escape the attention of the investigators.

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 ORMC 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

March 2018

This monthly newsletter is prepared by the APA's Communications Team as a benefit for our District Branches and State Associations. 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

- Bruce J. Schwartz, M.D. has been chosen as the next President-Elect of the American Psychiatric Association. Dr. Schwartz has served in numerous leadership roles at APA, including currently as the Treasurer of the APA and chair of the Audit Committee and member of the Investment Oversight Committee, Finance and Budget Committee and Board of the APA Foundation. You can see all of the results from the 2018 APA elections [here](#).
- APA, along with four other medical groups, released a statement calling on government to take action to end the public health epidemic of gun violence. The statement calls for funding for gun violence research at the Centers for Disease Control and Prevention (CDC), as well as common sense restrictions on the manufacture and sale of assault weapons and associated paraphernalia. You can read the joint statement [here](#).
- APA issued a statement calling on the Trump Administration and Congress to engage in an open and honest conversation around mental illness. The statement calls for a meaningful dialogue on ways to enforce the Mental Health Parity and Addiction Equity Act of 2008, improve access to quality mental health and substance use services by addressing workforce shortages, and invest in research to improve early detection and intervention for mental illnesses. You can read APA's statement [here](#).

Mark Your Calendar

- Brain Injury Awareness Month (March)
- National Sleep Awareness Week (Mar. 4 – 11)
- Brain Awareness Week (Mar. 12 – 18)
- World Down Syndrome Day (Mar. 21)
- National Nutrition Month (March)

Feedback on MOC Requirements Requested for ABMS Online Survey

The American Board of Medical Specialties (ABMS) is inviting physicians to provide feedback on Maintenance of Certification (MOC) requirements through an online survey. Feedback from the survey will help identify key concerns regarding MOC and inform the work of ABMS's new Vision for the Future Commission, which aims to use the data in a comprehensive assessment of continuous board certification. The survey represents a chance for APA members to register their concerns about MOC and its relevance to physicians and patient care. You can take the ABMS online MOC survey. [Go to ABMS site for the link.](#)

March Course of the Month - Motivational Interviewing in Context

Motivational Interviewing (MI) has been transformational in medical care. MI is of special importance because it can be viewed as the essential clinical skill for engaging patients in treatment and motivating patients to reduce substance use and to follow through with specific recommended behavioral or pharmacological treatments. Presented by Petros Levounis, M.D., M.A. of the Rutgers New Jersey School of Medicine. [Go to APA website for the link.](#)

Register for the 2018 APA Annual Meeting

Join us at this year's Annual Meeting in New York, May 5-9, 2018. APA's Annual Meeting is the premier psychiatry event of the year. With over 450 educational sessions and courses, there is no better event to help you expand your knowledge, network, and meet certification and licensure requirements. Members receive a steep discount on registration. [Go to APA website for the link.](#)

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In California, d/b/a Transatlantic Professional Risk Management and Insurance Services.

UPCOMING SEMINARS!

A RISK MANAGEMENT CME SEMINAR



TELEPSYCHIATRY: WHAT YOU NEED TO KNOW

Join PRMS for a half-day CME seminar that explores the legal and clinical issues and risks associated with telepsychiatry, including prescribing restrictions and maintaining the standard of care, as well as risk management advice to keep your patients and your practice safe.

NEW YORK CITY, NY
MAY 4, 2018

PHILADELPHIA, PA
TBD, 2018

CLEVELAND, OH
TBD, 2018

SEATTLE, WA
OCTOBER 19, 2018

FREE Residents, Fellows and PRMS Clients

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ANNOUNCEMENTS AND ADS

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/ullqriwoa37njz/Genomind%20presentation.pptx?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 two monthly newsletters - Biological Therapies in Psychiatry and 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](#).

Medical Director and Psychiatrist(s) (PT/FT)

- The Mental Health Association of Rockland County, Inc. (MHA) was founded by a group of concerned citizens in 1951 to advocate for the development of public mental health services in Rockland County. Currently we are accepting resumes for the positions of a Medical Director and Psychiatrist(s) (PT/FT) to provide mental health and addiction services to the residents in Rockland County in our busy nonprofit agency.

- The Medical Director will supervise medical staff; provide psychiatric services; prescribe drugs and diagnostic tests; participate in treatment planning and goal setting; assist in the dev of support services and emergency coverage; and maintain case records.
- The Psychiatrist(s) performs diagnostic assessments to evaluate medication and overall mental health needs of clients in a busy and culturally diverse recovery program; prescribes medication; conducts group and family therapy sessions, monitors clients for side effects of medications; participates in treatment planning meetings and meets with other clinical and treatment staff for case review and input. Some programs include field work.
- Completion in an approved resident training and NYS license to practice psychiatric medicine and experience in a mental health, clinic or related program. Open to obtaining a federal DATA 2000 waiver (buprenorphine-certified.) Must be able to apply for Medicaid/Medicare reimbursement services. Must have or be able to obtain a board certification in addiction psychiatry or the equiv. If interested, send resume including salary requirements and availability to: MHA of Rockland, Att: HR, 140 Rte 303, Valley Cottage, NY 10989, Fax #:845-267-2169, or email: dejesust@mharockland.org. [For additional information, including benefits please visit our website www.mharockland.org](http://www.mharockland.org).

• EOE

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.

• Rockland County Depression and Bipolar Support Alliance

- Peer-to-peer run support group for people with depression, bipolar disorder, anxiety disorder or any related mood disorder & their friends & family. The support group meets every Thursday night from 6:30 - 8:30 at Jawonio, inc. 775 N Main St. New Hempstead. Reservations are not required. There is no fee for attending the support group meetings. This is a very warm and welcoming group run by people who have been there and can help. Any questions please call Leslie or Leonard at 845-837-1182.

Rockland County Department of Mental Health (RCDMH) is seeking to contract with psychiatrists to provide child custody evaluations referred to RCDMH by Family Court. Flexible time and competitive terms. Please contact Salina Williams at 845 364-2391.



PSYCHIATRIST, OUT-PATIENT HEALTH CENTER (INDEPENDENT CONTRACTOR)

Location: New City, NY 10956
Division: Health Center
Status: Independent Contractor

Build a brighter future...For those with special needs AND for yourself!

Since 1947, Jawonio has advanced the independence, well-being and equality for people with disabilities and special needs. We take tremendous pride in making a positive difference in the lives of the individuals and families whom we support and now we're looking for a compassionate and caring person who wants to enrich their own life and the lives of others by working alongside a talented team of professionals in a working environment of personal accountability, mutual respect and most of all a true sense of teamwork.

As a **Psychiatrist** (Independent Contractor), you will provide diagnoses and treat individuals in our outpatient Health Center located in New City (Rockland County), NY. We are seeking a part-time NYS board certified Psychiatrist to work with adults and or children/adolescents with Behavioral Health and adults or children/adolescents with Developmental Disabilities in our outpatient health center which operates 8:00am – 5:00pm Monday through Friday; very flexible hours available. The qualified candidate will work with an integrated treatment team consisting of other Psychiatrists, Psychologist, LCSWs, LPNs, MD, Patient Services Representatives, Schedulers and a Coding and Compliance Specialist. Jawonio will provide administrative support and office space.

How to Apply:

Please sent Resumes to:
Jawonio Inc
Human Resources Department
260 N. Little Tor Road
New City, NY 10956

Or by Fax to (845) 639-3530
Or by E-Mail to jobs@jawonio.org

We encourage all qualified applicants to apply.

Jawonio, Inc. does not base employment decisions on an individual's race, color, sex/gender, genetic predisposition, sexual orientation/preference, religion, age, national origin, disability, military or veteran status or any other characteristic protected by federal, state or local law. In addition, Jawonio, Inc. may make reasonable accommodations to enable applicants to participate in the hiring process and employees to

The Clinical Research Division (CRD, Director: Dan V. Iosifescu, MD, MSc) at the Nathan Kline Institute is pleased to announce we are starting several clinical trials in patients with major depressive disorder (MDD). We plan to evaluate novel potential treatments, including devices and pharmacological agents.

Our first study is testing transcranial laser therapy (TLT) in addition to antidepressants for MDD subjects who have failed to improve with antidepressants alone.

You can find more information about the study in the following summary description:
<https://clinicaltrials.gov/ct2/show/NCT02959307>

Interested patients should contact Dr. Karen Nolan at 845-398-6572. The study PI, Dr. Dan Iosifescu, will be happy to answer your questions (845-398-6568), or Dan.Iosifescu@nki.rfmh.org

Have you been feeling sad, blue, or down in the dumps?

Have you lost interest in the things you used to enjoy?

Are you looking for help?

If so, you may be eligible to participate in a research study using Transcranial LED Therapy (TLT) to treat depression that is being conducted at the Nathan Kline Institute in Orangeburg, NY.

TLT involves a non-invasive and invisible beam of light that increases energy metabolism in the brain, and some of this increased brain activity may help people with depression. This treatment is not the same as electroconvulsive therapy (ECT).

All TLT sessions will take place at the Nathan Kline Institute. The visits include 1 initial screening visit, 24 TLT sessions, and 1 follow-up visit making for a total of 26 visits to our program. Those who qualify will receive the experimental treatment, study-related, medical exams, and laboratory tests at no cost. Study participants will be compensated \$50 per study visit.

If you are between 18 and 70 years old and would like more information please contact

Karen Nolan at 845-398-6572 or email nolan@nki.rfmh.org



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