President’s Message: APA Annual Advocacy Days

By C. Deborah Cross, MD

The APA held its annual Advocacy Days in Washington, DC on February 10-13. This annual event involves recruiting time for APA Legislative and Public Affairs Representatives. It offers an opportunity to become familiar with the inner workings of our APA Division of Government Relations and to be briefed by them on the legislative priorities of the APA. For those of you who have attended these in the past, there is much that is familiar, but always a new way of looking at issues and, often, new issues. The first two days are spent in briefings by the staff. Helpful fact sheets are prepared, handed out and gone over in detail. (I’ll get to the actual content later in the column.) There is also a focus on media and public speaking training using a public relations firm which works with the APA. You may think you know the basics, but you really need to keep studying. There are always extremely interesting speak- ers. This year, at least on Monday morning we were privileged to listen to Charlie Cook the editor and publisher of “The Cook Political Report” who gave us his view of the current political election season. Then at lunch we heard from The Honorable James B. Peake, MD the Secretary of the U.S. Department of Veterans Affairs. Obviously, veterans’ mental health services are of grave concern across the country and it was heartening to hear the plans that Dr. Peake and Dr. Ira Katz (the head psychiatrist in the VA) are putting together to deal with this huge problem. This was followed by an outstanding panel discussing access to mental health for veterans and their families. The panelists included Michael Brownlie, the legislative director to US Representative Michael Michaud (D-ME), Alan Morgan, the CEO of the National Rural Health Association, Kathleen B. Moakler, Director, Department of Government Relations, National Military Family Association, Ralph Bouon, J.D., Vice President, Government Affairs, Mental Health America; and Dan Blazer, MD, Member, Department of Defense Mental Health Commission.

Albany Report

By Richard J. Gallo and Barry B. Perlman, MD

EXECUTIVE BUDGET FOR MENTAL HEALTH

Despite the $4.4 billion budget gap and proposed cuts to close it, funding for mental health and related services fare well in the 2008-2009 Executive Budget Request. In health and mental health, (including chemical dependency) the emphasis is on recom- pensing the payment systems methodology under Medicaid to enhance ambulatory serv- ices and reduce specialty psychiatric inpatient care. The past several months have seen an unprecedented level of cooperative planning between the various state agencies responsi- ble for health and human services. The joint planning efforts are clearly reflected in the Governor’s Budget Request and the resulting proposed initiatives have been well received by most stakeholders. However, as they say, “the devil is in the details,” which are still being fleshed out by the state agencies involved. Highlights from the Executive Budget Request for the Office of Mental Health are as follows:

AID TO LOCALITIES

The 2008-2009 Budget Recommendation for the Office of Mental Health (OMH) advances initiatives to manage the care of high cost populations and rationalize reim- bursement, including innovative payment techniques by adjustments to OMH Aid to Localities appropriations.

Budgeting and the Ambulatory Care System and Removing Barriers to Specialty Mental Health Treatment for Children ($5 million)

Elements of this initiative include the establishment of minimum reimbursements for clinics licensed solely under the Mental Hygiene Law, rebasing CPT codes, providers one last time and then eliminating future rebasing of rates and reconcilia- tions of CPT rates, removing the so-called Medicaid “parity cap” for mental health clinic services, and limiting “COPS-only” payments for managed care enrollees when a managed care plan has provided or approved payment for the base rate. OMH will also make the neces- sary changes to allow an increase in the numbers of Speciality Clinics for Children, which supply significant, ongo- ing treatment to seriously emotionally disturbed children enrolled in Medicaid Managed Care.

Budgeting Year Three of a Multi-Year Cost of Living Adjustment (COLA) ($30.1 million)

Expanding Supported Housing ($1.1 million)

Expanding Efficiency Apartment Bed Budget for Persons with Mental Illness ($145 million in Capital Funding)

Enhancing Community Reimbursement for Family Based Treatment Models ($12 million)

Enhancing Family Care Reimbursement ($1.5 million)

Adding Family Support Services to Child and Family Clinic Plus ($1.0 million)

Managing the Care of People with Co- Occurring Disorders ($1.0 million ($2.5 million full annual) for treatment of OUD & DOH to engage in demonstration pro- grams to address the treatment needs of persons who are both mentally ill and chemically dependent, effective January 1, 2009.

Legislative Brunches

By Rachel A. Fernbach, Esq.

The New York City District Branches of the APA held their Ninth Annual Citywide Legislative Breakfast on December 2, 2007, at The New York Academy of Medicine, 1216 York Avenue, New York. One week later, the Psychiatric Society of Westchester hosted its 21st Annual Legislative Brunch on December 9, 2007, at the Crowne Plaza Hotel in White Plains, New York. Barry Perlman, MD, NYSAPA Past-President and current Chair of the NYSAPA Committee on Legislation, spoke at both events and pro- vided a highlight of current issues facing New York psychiatrists, including implementation and possible expansion of Timothy’s Law, proposed a bill that would seek to prevent assisted suicide, and enthusiastic individuals. Assemblyman Richard Gottfried opened his address to the group. She discussed some of the challenges associated with implementa- tion of the law and noted her work in support of a universal health care system. Senator Liz Krueger reminded NYSAPA and its district branches to outline the help of state agencies when embarking on new initiatives and efforts. Assemlbyman Richard Gottfried opened his remarks by noting that he has worked with six different governors during his tenure in the Assembly. He is happy to report that Governor Spitzer’s health and mental health care team are intelligent, interested and enthusiastic individuals. Assemblyman Gottfried also announced that he has spon- sorred a bill that would seek to prevent health care professionals from participating in somatic or mistreatment of prisoners by making such participation a violation of the New York Public Health Law as well as pro- fessional misconduct. In addition, he noted

Medicare 2008 Update

By Seth P. Stein, Esq.

On Saturday, December 29, 2007, the Medicare, Medicaid, and SCHIP Extension Act of 2007 was signed into law and provided a 0.5% increase in the Medicare conversion factor for six months. This increase averted the 10.1% cut in the conversion factor that was originally scheduled for the 2008 Medicare physician fee schedule. However, other factors also impacted Medicare fees:

- Continued implementation of the four year phase-in of the revised practice expense relative value units resulted in small increases and decreases in the fees.
- CMS approved significant increases in work relative value units for anesthesiol- ogy services, subsequent nursing facility care (93070-93310) services and home health services as part of its five year review of the Work RVU assigned to all 7,700 CPR codes.
- Implementation of the statutory require- ment for budget neutrality mandated that the increase be offset by reductions in the Medicare fees for all CPR codes to the extent the cost of the increase to the amounts granted to the procedures codes that received a Work RVU enhancement.

The net impact on psychiatrists will be small increases and decreases in the range of 1% to 2% in the 906xx codes and in E/M codes typically used by psychiatrists. As a general exception noted above is a substantial increase in the Subsequent Nursing Facility Care codes (93070-93310). However, questions remain - what does a six month 0.5% increase mean and what will happen at the end of June, 2008? If there is no action in Congress, then the 10.1% fee cuts that were just averted would go into effect for the balance of the year. The APA is working with the AMA and other medical specialty organizations to develop a perma- nent solution to the flawed Medicare conver- sion factor update formula that is the source of the problem. Without a permanent solu- tion to the formula used to determine the annual adjustment to the Medicare conver- sion factor, there will be no meaningful cost of living adjustments to the Medicare fee schedule.

If a permanent solution is not agreed upon before Congress adjourns for the 2008 camp- aign season this summer, one likely out- come is the extension of the 0.5% increase through the end of 2008 – a very temporary fix that will simply push the problem to the end of the year. If there is any change in the Medicare fee schedule for the second half of 2008, NYSAPA will issue an e-Bulletin with the latest information. If Medicare fees change for the

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Treasurer
Past President
welcomes advertise-
ber subscriptions, which describes the APA Annual Advocacy Day in Washington, D.C. On the state level and local level, we have an article describing the legislative branches for NYC and West-
chester. We have an update on Medicare as well as the Albany Report which in-
cludes an overview of the Executive Budget for Mental Health. These important issues con-
tinue to show the importance of advocacy on national, state, and local levels.

We also report on the upcoming NYSPA Scientific Paper Court. Awards will be pre-

ted at the NYSPA Spring Meeting. The 2018 NYS Trustees Report provides an updates on activities of the APA Board. We also have an article about the transition from Member-
ship to Early Career Psychiatrists. Finally, we have a farewell letter from Michael Blumenfeld, MD who is moving to California.

President’s Message

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Then it was time for the break out sessions by state. Barry Perlman, MD, past president of NYSPA, and also Chair of the APA’s Government Relations Committee, said that we would be splitting into small groups by state. We were all excited to learn more about the issues in our state and to engage with our partners in our state legislature. A representative from each state shared their state’s legislative achievements and challenges with the team. We were able to discuss our state’s legislative priorities and to learn from each other about strategies for addressing common issues. We also heard from NYSPA staff and NYSPA members about their experiences advocating for mental health at the state level. We concluded our day with a debriefing session to reflect on what we had learned and to discuss next steps for advocacy in the coming year.

Why Continue Your APA Membership as a Member-
in-Training (MIT) or Early Career Psychiatrist (ECP)?

Our collective experience as MIT and ECP members of the APA has been beneficial both educationally and practically. As a dues-paying member of the APA, you also automatically belong to the New York State Psychiatric Association (NYSPA), which is a constituent society of the APA. NYSPA membership provides access to a variety of benefits, including networking opportunities, educational resources, and advocacy initiatives. NYSPA membership also includes access to the APA website, which offers a wealth of information and resources for members. NYSPA membership also includes access to the APA website, which offers a wealth of information and resources for members.

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Medicare continued from page 1

second half of 2008, NYSPA will post new fee schedules on its website, but no additional mailing is planned at this time. Therefore, it is imperative that all members send their email address to NYSPA to ensure that all members receive vital information as quickly as possible. If you are not already receiving e-Bulletins from NYSPA, please send your email address to NYSPA at centraloffice@nyspsych.org.

In early February, NYSPA sent out its 20th annual memorandum prepared exclusively for the members of the New York State Psychiatric Association on Medicare issues. The Medicare 2008 Update contains the new format implemented last year:

• The locum tenens fee schedules with Medicare fees for 29 key psychiatric (908XX) and Evaluation/Management (99204) CPT codes for each of the five Medicare regions in New York are enclosed. A fuller schedule of 92 codes for each locality is now available to be viewed or downloaded from the Members Only section of the NYSPA website www.nyspsych.org. Just click on the 2008 Medicare Update button and follow the instructions. If you don’t have your password, call or email the NYSPA office at 516 542-0077 or centraloffice@nyspsych.org.

• A Medicare Primer with extensive basic information is included in the Medicare 2008 Update. This new handbook is available to be viewed or downloaded from the NYSPA website. The Medicare Primer includes information on Medicare fee schedules, including 99204 CPT code for CPT code for New Coding Options for Psychiatric Services which was included in last year’s update. The new Primer’s 127 pages contain a wealth of information for the psychiatrist.

Medicare covers psychotherapy and the non-psychotherapy services listed above, with the exception of the following:

• Treatment of drug and alcohol abuse
• Long-term care services
• Nursing home care
• Mental nursing facilities
• Services of a Psychiatric Nurse Practitioner

Medicare coverage for the mentally ill requires constant vigilance, as proposed cuts to the Medicaid program continue to be a threat to our patient’s care. While legislation authorizing new funding for Medicaid co-pay was again introduced, with increased support, it will not pass this Congress. However, there has been a small increase in research funding, which needs to be continually supported!

have a great 2008!!! Please contact me directly for further information.

Classifieds

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that his office is developing legislation to address the proposed physician rating sys-

A majority of the participants are concerned about the impact of the proposed physician rating system on their ability to provide quality care to their patients. Participants expressed concern that such ratings could lead to a loss of patients and revenue for hospitals, and that it would be difficult for hospitals to control the information that is used to generate these ratings. Some participants suggested that the proposed system could be improved by providing more information about the methodology used to generate the ratings, and by allowing hospitals to provide feedback on the ratings. Overall, there was a consensus that any legislation addressing physician ratings should take into account the concerns of hospitals and patients, and that it should be carefully crafted to ensure that it does not harm the quality of care provided to patients.
Excellent Response to First Scientific Paper Contest

Seeth Vivek, MD, Chair, Scientific Paper Committee

We are pleased to announce the 23 entries received for the First NYSPA Scientific Paper Contest. Our committee contacted all training directors and chairs of the 29 residency training programs in Area 2 (New York State), inviting papers by residents at all levels of training. The papers could represent original research, review of literature or case reports limited to 5000 words. The paper needed to represent work that was primarily that of the resident. These entries will now be evaluated by an eminent panel of judges consisting of:

- Jack McIntyre, MD, Past President, APA
- Donna Norris, MD, Secretary Treasurer, APA
- Nada Stotland, MD, President Elect, APA

The judges will choose first, second and third place winners. Awards will be presented on March 29 at the Spring Meeting of NYSPA at the LaGuardia Marriott. The first place winner will have the opportunity to present his or her paper. All entrants will receive a certificate of participation.

We congratulate our contestants who are listed in alphabetical order:

- Rashi Aggarwal, MD
- Maimonides Medical Center
- Self Perceived & Patient Perceived Psychiatrist Empathy
- Recovery Orientation in Mental Health Staff
- Sunny P. Aslam, MD
- SUNY Upstate University
- Valaclovir-Induced Psychosis and Manic Symptoms in an Adolescent Female with Genital Herpes
- Jafar Bozorgzadeh, MD
- Jamaica Hospital Medical Center
- A Case Study: Increased suicidal ideation among patients with pathological gambling
- Raphael J Braga, MD
- North Shore LIJ Zucker Hillside
- Somatic Therapies for Treatment-Resistant Psychiatric Disorders
- Anthony Charuvasttra, MD
- NYU Child Study Center
- Unconscious Emotional Reasoning & the Therapeutic Misconception
- Susan Chlebowksi, MD
- SUNY Upstate University
- Personality Change Due to Spontaneous Intracranial Hypo-Tension
- Michael Cirrani, MD
- NYU Medical Center
- The Relative Toxicity of Second-Generation vs. First Generation Antipsychotics
- Sigrid Formantes, MD
- Brookdale University
- Determinants of Acute Psychiatric Inpatient Hospitalization for Children & Adolescents
- Zachary Freyberg, MD
- New York Presbyterian Hospital
- What’s In A Sentence? Narrative Content & Diagnostic Psychiatry
- Marrian S. Georgiev, MD
- Jamaica Hospital
- Case report of Paranoia with violent behavior
- Ragn R. Girgis, MD
- Columbia University
- Antipsychotic Drug Mechanisms Links between Efficacy, Metabolic Side Effects, and the Insulin Signaling Pathway
- Rose Michael, MD
- Jamaica Hospital
- Is There a Relationship Between Affective Disorder & Creativity?
- Sachid Peteru, MD
- Jamaica Hospital Center
- Long Term Psychodynamic Psychotherapy
- Padmaja Puppala, MD
- Jamaica Hospital Medical Center
- Mesial Temporal Sclerosis (MTS) An Interesting Interface between Psychiatry and Neurology
- Padmaja Puppala, MD
- Jamaica Hospital Medical Center
- Asperger’s Syndrome: Is It Coincidental or Under diagnosed In the Elderly
- Salah Qureshi, MD
- Jamaica Hospital Medical Center
- Unhappy Feet: One Woman’s Severe Akathisia
- Sagarka Ray, MD
- Jamaica Hospital Medical Center
- Religious Faith or Psychosis? : A Diagnostic Dilemma
- Andrew Rosenfeld, MD
- Columbia University
- Oxytocin, Dopamine, & the Amygdala: A Model of Emotion Processing Deficits & Negative Symptoms in Schizophrenia
- Kulwant Singh, MD
- Jamaica Hospital Medical Center
- Dreams in a Psychotic patient
- Saloni Wadia, MD
- Jamaica Hospital Medical Center
- Elder Abuse-Watch Out for Grandma! A Literature Review
- Saloni Wadia, MD
- Jamaica Hospital Medical Center
- From Pieces to Piece! Does Dissociative Identity Disorder (DID) Really Exist? The Controversy Continues
- Anna Yusim, MD
- NYU Medical Center
- Normal Pressure Hydrocephalus Presenting as Othello Syndrome: Case Presentation & Review of the Literature

We thank all our participants and our judges for their efforts.

Scientific Paper Committee

Jose Vito, MD, Emily Stein, MD, Evaristo Akerlele, MD, William Lewek, MD, Marvin Koss, MD, Seeth Vivek, MD

NYSPA Staff: Donna Gajda, Christina DiGiovanni

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**Brunches continued from page 4**

Robin Bauer, Board Member of the National Alliance for the Mentally Ill – Westchester, and Richard Gallo, NYSPA Government Relations Advocate, also attended the event. Assemblyman Adam Bradley expressed support for Timothy’s Law and his agreement that drug and alcohol addiction and post-traumatic stress disorder should be included as covered conditions. He noted that there is tremendous support for these changes in the Assembly. Assemblyman Bradley also discussed the problem of mentally ill inmates and his commitment to work on improving care and treatment for the mentally ill prison population. Finally, he discussed legislation he plans to propose regarding viability of hospitals and the failure of many HMOs to make prompt payments. Assemblyman Mike Spano also stated that he supports the inclusion of drug and alcohol addiction and post-traumatic stress disorder as covered conditions under Timothy’s Law. In addition, with respect to the proposed doctor ratings system, he hopes that health care providers will have significant input in the development process.

Assemblyman George Latimer spoke briefly and echoed the sentiments of Assembly members Bradley and Spano in their support of the issues raised by psychiatrists and NYSPA. Westchester County Legislator Thomas Abinanti stated that it is important for county government to partner with state legislators and the federal government in order to achieve goals at the local level. However, the County has had to increase its own budget recently due to budget cutsbacks at the state level. Legislator Abinanti shared

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with the group that, as the parent of a child with autism, he has had to navigate the local and state mental health system as a consumer and he is aware of the challenges that individuals face in obtaining appropriate care and treatment. He also supports an integrated system for universal health care.

Grant Mitchell, MD, Commissioner of the Westchester County Department of Community Mental Health, who is also a psychiatrist, urged those present to focus on the 20% of the mentally ill population who have trouble accessing the mental health system and as a result, are not getting the care they need. He discussed the Care Coordination Project, a new pilot program to be conducted by the Department in 2008-2009 that will create two new care coordination positions. The care coordinators will work with the top 200 users of Medicaid services within the county to provide coordination of care in an attempt to improve outcomes and reduce Medicaid expenditures.

Next, Robin Bauer, a Board Member of NAMI-Westchester and a legal aid attorney, addressed the group. She described her work on the establishment of a mental health court in Westchester, which is a non-adversarial court that provides a team approach to assisting individuals with mental illness who have been charged with a criminal offense. Mrs. Bauer noted that NAMI was also involved with the creation of the court which has been a huge success in providing support and assistance to mentally ill individuals in the county.

The Westchester event concluded with remarks from Richard Gallo, NYSPA Government Relations Advocate, who discussed ongoing issues regarding the implementation of Timothy’s Law. He encouraged members experiencing problems or issues in connection with Timothy’s Law to contact him at rigallo@msn.com or 518-465-3345.

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