President's Message: Once Again the APA is Asked to “Confront” a Political Issue

By C. Deborah Cross, M.D.

As I write this column in the last days of 2006, I am reminded of the task that James J. Timoney, M.D., New York City District Branch, did to look back and to look forward. We, as New York State Psychiatrists, have a lot to look back on in 2006 with great pride. The passage of Timothy’s Law was an incredible achievement for all New Yorkers. It is not a perfect piece of legislation (that remains for 2007), but for the first time, we can stand up and say that New York has the recognition of all people in this state to have equal access to treatment for mental illness. Like many others, I do not know how we got there, but I know we have a lot of work to do with this new law. As we move forward, our agenda is large.

President's Message: Once Again the APA is Asked to “Confront” a Political Issue

By C. Deborah Cross, M.D.

As I write this column in the last days of 2006, I am reminded of the task that James J. Timoney, M.D., New York City District Branch, did to look back and to look forward. We, as New York State Psychiatrists, have a lot to look back on in 2006 with great pride. The passage of Timothy’s Law was an incredible achievement for all New Yorkers. It is not a perfect piece of legislation (that remains for 2007), but for the first time, we can stand up and say that New York has the recognition of all people in this state to have equal access to treatment for mental illness. Like many others, I do not know how we got there, but I know we have a lot of work to do with this new law. As we move forward, our agenda is large.

As I write this column in the last days of 2006, I am reminded of the task that James J. Timoney, M.D., New York City District Branch, did to look back and to look forward. We, as New York State Psychiatrists, have a lot to look back on in 2006 with great pride. The passage of Timothy’s Law was an incredible achievement for all New Yorkers. It is not a perfect piece of legislation (that remains for 2007), but for the first time, we can stand up and say that New York has the recognition of all people in this state to have equal access to treatment for mental illness. Like many others, I do not know how we got there, but I know we have a lot of work to do with this new law. As we move forward, our agenda is large.

As I write this column in the last days of 2006, I am reminded of the task that James J. Timoney, M.D., New York City District Branch, did to look back and to look forward. We, as New York State Psychiatrists, have a lot to look back on in 2006 with great pride. The passage of Timothy’s Law was an incredible achievement for all New Yorkers. It is not a perfect piece of legislation (that remains for 2007), but for the first time, we can stand up and say that New York has the recognition of all people in this state to have equal access to treatment for mental illness. Like many others, I do not know how we got there, but I know we have a lot of work to do with this new law. As we move forward, our agenda is large.

As I write this column in the last days of 2006, I am reminded of the task that James J. Timoney, M.D., New York City District Branch, did to look back and to look forward. We, as New York State Psychiatrists, have a lot to look back on in 2006 with great pride. The passage of Timothy’s Law was an incredible achievement for all New Yorkers. It is not a perfect piece of legislation (that remains for 2007), but for the first time, we can stand up and say that New York has the recognition of all people in this state to have equal access to treatment for mental illness. Like many others, I do not know how we got there, but I know we have a lot of work to do with this new law. As we move forward, our agenda is large.

As I write this column in the last days of 2006, I am reminded of the task that James J. Timoney, M.D., New York City District Branch, did to look back and to look forward. We, as New York State Psychiatrists, have a lot to look back on in 2006 with great pride. The passage of Timothy’s Law was an incredible achievement for all New Yorkers. It is not a perfect piece of legislation (that remains for 2007), but for the first time, we can stand up and say that New York has the recognition of all people in this state to have equal access to treatment for mental illness. Like many others, I do not know how we got there, but I know we have a lot of work to do with this new law. As we move forward, our agenda is large.
I am pleased that the lead headline of this Bulletin is “Timothy’s Law is the Law.” I am proud to be an advocate for the legislation which has worked for years along with other advocates for equality of benefits for mental health treatment. This law is a major step forward in improving access to care and decreasing stigma.

President’s Message

I joining the APA—don’t give up after one contact!

And if you are not active in your District Branch, you need to call them and ask what you can do to get involved. NYSPA offers a number of umbrella organizations for New York District Branches, also has a number of committees made up of members from various DAs. We are always looking for interested and committed psychiatrists who want to make a difference! Challenges abound. I have just formed a Committee on Information Technology. In fact, NYSPA was the first psychiatric organization in the country to establish a website. And this is how for physicians and we must be involved in the development and implementation of the process.

A couple of years ago the APA started a 100 club for psychiatry residency programs. In order to get access to our website as others are they are recognized in the APA Psychiatric News. A number of the New York residents are members of the 100 club, meaning that all the residents are members of the APA. It is my goal that we have a 100% for all of New York State, with all the psychiatry residency programs in NY being 100% members of the APA. If you have any questions, I can, for example, be a Chair of a Medical School or Director of a Psychiatric Service with a residency. I challenge you to bring your programs into the 100% club, NY’s has more residences than any other state! We need to set the standard for the rest of the country. There are numerous issues that we in organized psychiatry need to focus on with our residents. We are extremely privileged to lead your resident issues such as visa status, fellowship training, and loan forgiveness, are critical and NYSPA needs to focus on these issues as the future of our profession. I encourage all residents to become active in NYSPA. Contact us and let us know how we can help you as you begin your career. One of the most visible benefits of NYSPA is the E-Bulletin! If you are “connected” to the Web, and you have your email address, you get our E-Bulletin. When action is required, you will get an email. And then you will know. (And this is what made the difference in this past Legislative Session—starting Timothy’s Law!)

When there is an issue affecting reimbursement by Medicare or Medicaid, you hear about it from NYSPA through the E-Bulletin. If you don’t get the E-Bulletin send us your email address and we will put you on the list. NYSPA is your professional home. Let us know what you want us to focus on and what your priorities are. I would urge each of you to take a moment and write down what you want to see happen this year that NYSPA can work on. Then send your list to us. Email me directly at jbowen@nyam.org, email NYSPA’s office at centraloffice@nyps.org, or write a letter to the Editor of The Bulletin, Jeff Borenstein, M.D. As we begin 2007, I know that together we can achieve momentous gains for our patients and our profession.

Albany Report

sidered is to establish a “grace period” for completing filing and notification requirements without penalties to insurers while, at the same time, providing for the payment of covered services under the new law, retroactively, if necessary. Such a solution does not appear to require legislative action.

In the meantime, we are told the 2007-2008 Executive Budget Request will include all appropriations for a gropue of Good Fund appropriations to cover the full cost of the 50/50 base benefits to all employees or for less employees who provide group health insurance to their employees. Without diminishing our efforts, the executive accomplish in enacting Timothy’s Law, the last several years have continued a long journey to the “starting line.” In order to gain the enactment of this legislation, many crucial elements to what is considered “full parity” were included in another section: parity for chemical dependency, the addition of mental health and chemical dependency coverage in the “Healthy New York” plan, and the inclusion of a full array of diagnose in the mandated parity criteria for employee groups of 50 or more, as well as, in the “subscriber option” applicable to employer groups of 50 or less. Also, contemplated but not addressed specifically by the TLC in this go-round is the provisions for uninsured mental health care.

Mandating the right to more mental health benefit coverage and multiple utilization review practices, in fact, the added work load could make them even worse. So how it is or if the implementation of TLC energy toward legislation which levels the playing field between the consumer-provider community and managed health care entities.

We also cover other legislative issues, with an update on the Legislative Branches in NYC and Westchester, as well as an article on the need for civil commitment for sexually violent predators. The President’s Message focuses on advocacy and participation in NYSPA and APA. The Area II Trustee report provides an update on a number of national APA issues.

In addition, we report on Medicate fees, with a decrease for 2007 as well as information about the use of E/M Codes. Finally, we have initiated a new feature, the NYSPA Interview. In this edition, our Assistant Editor, Rachel Fenbach Esq., interviews Suzanne Vogel-Scibilia, M.D., President of the Board of Trustees of NAMI.

Timothy’s Law Provisions

These are the provisions of Timothy’s Law, which took effect Jan. 1:

• Every person covered by group health insurance or a group policy in a Group Fund participation to cover the full cost of the 50/50 base benefits for all employers or for less employers who provide group health insurance to their employees.

• Without diminishing our efforts, the Executive accomplish in enacting Timothy’s Law, the last several years have continued a long journey to the “starting line.” In order to gain the enactment of this legislation, many crucial elements to what is considered “full parity” were included in another section: parity for chemical dependency, the addition of mental health and chemical dependency coverage in the “Healthy New York” plan, and the inclusion of a full array of diagnose in the mandated parity criteria for employee groups of 50 or more, as well as, in the “subscriber option” applicable to employer groups of 50 or less. Also, contemplated but not addressed specifically by the TLC in this go-round is the provisions for uninsured mental health care. Mandating the right to more mental health benefit coverage and multiple utilization review practices, in fact, the added work load could make them even worse. So how it is or if the implementation of TLC energy toward legislation which levels the playing field between the consumer-provider community and managed health care entities.

The law does not affect utilization review requirements or our network of preferred providers, except that such differential must mirror those imposed on other covered illnesses in the policy. However, networks must demonstrate an adequate number of participating providers as will be necessary to accommodate the additional number of insured persons and added coverage.

The law is in effect for three years. During that time, the state has to analyze the cost and effect of the law.

The law does not affect coverage under the Child Health Plus, Family Health Plus or Healthy New York programs nor does it affect self-insurance plans which are exempt from state insurance law requirements by federal law (ERISA).

Ed Hornick Award Lecture to be given by Dr. Harold Koplewicz

The New York Academy of Medicine and the Society for Adolescent Psychiatry have selected Harold S. Koplewicz, M.D. as the recipient of the 2007 Ed Hornick Memorial Award. Dr. Koplewicz will speak on “Understanding Adolescent Depression.” The lecture will be given Wednesday March 21, 2007 at the NY Academy of Medicine, at 103rd Street and Fifth Avenue. Although there is no charge for lecture or reception, pre-registration is mandatory. NYSPA members may register by calling Donald Morcon at the NY Academy of Medicine (212-822-7727) or online dmmorcone@nyam.org. The reception with Dr. Koplewicz will be from 6 pm to 7:30 pm with the lecture from 7:30 pm to 8:30 pm. Discussion and questions will be until 9 pm.

T

New York State Psychiatric Association • THE BULLETIN Winter 2007

Page 2

The Bulletin welcomes articles and letters that NYSPA members will find timely, relevant, and compelling. Articles should be between 750 and 1500 words (three to five double-spaced manuscript pages) and letters no more than 750 words. All submissions must be made electronically, preferably by email to the editor. All authors are encouraged to also provide a photograph of themselves which will be printed alongside their article.

Information for Advertisers

The Bulletin reaches both individual psychiatrists and commercial enterprises. Total circulation averages 5,500 copies per issue. The Bulletin is received by members of the American Psychiatric Association who belong to a district branch in New York State. The Bulletin is also sent to the leadership of other district branch
crossing the United States and to New York State legislators, medical libraries, and science writers. The Bulletin is published bi-monthly. Both classified advertisements and display advertisements are available. Please contact the editor for current rates and media requirements. NYSPA members receive a discount of 20% off the basic classified rate.

The President of the Board of Trustees of NAMI and the President of the Board of Trustees of the New York Academy of Medicine shall be entitled to receive Notices to the Editor at 5:30 pm. Discussion and questions will be directed at the President of the Board of Trustees of NAMI. NYSPA members receive a discount of 20% off the basic classified rate.

The opinions expressed in the articles or letters are the sole responsibility of the individual authors and may not necessarily represent the views of NYSPA, its members, or its officers.

Graphic Design & Production Lydia Duffie A to Z Design Group <lydiaad@hvcrr.com>
Suzanne Vogel-Scibilia, M.D., a practicing psychiatrist and Adjunct Assistant Professor of Medicine at the University of Pennsylvania, was President of the Board of Directors of the National Alliance on Mental Illness (“NAMI”) in 2006. She serves on NAMI’s board of directors, which seeks to advance its mission through education, advocacy, and legislation in the United States, providing advocacy, education, and support to individuals with mental illness and their families. NAMI has 1,100 affiliates in the United States and over 200,000 members. Dr. Vogel-Scibilia has served on NAMI’s board since 2001 and has been President since 2005. She also served for six years on the NAMI Pennsylvania Board of Directors and is Co-Chair of the annual NAMI Pennsylvania Walk. She joined the NAMI chapter and speaks frequently throughout Pennsylvania, protesting violence, advocating for parity, and increasing dollars for research!

How did you first get involved with NAMI?

**Dr. Vogel-Scibilia:** I first became a member of NAMI when I was teaching at Western Psychiatric Institute and Clinic. After that, I was invited to speak at the NAMI Beaver County chapter and then got more involved with NAMI on a local level. I also served on the NAMI Pennsylvania Regional Board. Then, I was invited to chair a meeting of the American Psychiatric Association in New York as a NAMI Exemplary Psychiatrist, a psychiatric recognition that recognizes significant work on behalf of persons with mental illness. During the meeting, a colleague told me that I needed a little bit of a life, and I had completed suicide. The colleague said “If you are a psychiatrist living in a rural area and you get sick, who is going to turn to you?” He was a really nice guy and he said all of this信息 was very compelling. I was very grateful. I began thinking more and more about the strong stigma and discrimination in society and how often it is a topic that is not discussed. In the future, there are more and more images and terrible stereotypes portrayed in the media. At that point, I decided to get higher and relevant going to the chair of the steering committee chaired by Dr. Kaplan. Work groups are now being appointed to begin developing strategic plans. There is a lot of base, developing work plans, etc. An important discussion at the Board was emphasizing that appropriate time, effort, and expertise was incorporated in such areas as community-based mental health care, access, cost, care, and respite services.

**Suzanne Vogel-Scibilia, M.D.** Of psychiatry and the medical profession towards physicians who have mental illness. Do you think this stigma, or perceived stigma, of the medical profession towards physicians who have mental illness? Dr. Kornack is an anti-stigma advocate who has made the claim that multiple sexual partners hurt a woman’s ability to be chosen by her partner. The Board considered this appointment a priority, and it is focused on family planning and the need to fund a national family planning program.

**Suzanne Vogel-Scibilia, M.D.** Of psychiatry and the medical profession towards physicians who have mental illness. Do you think this stigma, or perceived stigma, of the medical profession towards physicians who have mental illness?

**Dr. Vogel-Scibilia:** The challenge is to incorporate a full range of science and experience in our diverse and fascinating field!

**Suzanne Vogel-Scibilia, M.D.** Of psychiatry and the medical profession towards physicians who have mental illness. Do you think this stigma, or perceived stigma, of the medical profession towards physicians who have mental illness?
Dr. Perlman's Remarks at Legislative Brunch

"In a prior election year we would have taken note of the recent federal legislation and the possible impacts on our patients and our profession. I offered congratulations, and addressed our concerns for the coming sessions. Certainly, in our state and nationally there are important, possibly drainable levels of agenda. However, never before in the time we have been sponsoring these legislative brunches has the NYS Legislature had such important matters to address before the end of the current session. Therefore, never before has the task been to hear what you have to say about our perspective been so important. First, I say that NYSBA was gratified at the deal struck & reported between the 2 legislative chambers with respect to Timothy’s Law, the New York State mental health parity bill. Since then the Senate has passed the bill. We expect that the bill will be honored and that the Assembly too will pass the agreed to bill upon return, so that the legislation may be sent to the Governor. We were pleased to learn that Governor-elect Spitzer said he would sign such legislation if it came to him.

In passing it should be noted that since the election we've heard a lot about bipartisan cooperation in Washington. A federal parity bill would seem to us to be a good place to start as the president has expressed his interest and it has bipartisan sponsorship.

Second, the legislature will be debating the face of the recommendations of the “Commission on Health Care Facilities in the Twenty-First Century”, often referred to as the Brerger Commission. Those recommendations became public this past week. The NYSBA joined with other health advocacy groups to raise concern about the potential danger which the finding might inadvertently pose to the state’s public mental health system. We noted that mental health & substance abuse services represented only 7% of the monies expended by the 28 hospitals, those same monies represented 37% of the funds expended by OMH licensed facilities for mental health care. We were pleased to note that the Berger Commission’s recommendations displayed great sensitivity to the concerns and seem not to have endangered the state’s mental health system. While we take no specific position on the Berger Commission’s recommendations we can say that we do not oppose their adoption because concerns about the mental health system have been satisfactorily addressed. Indeed, we were pleased to note the following statement in the Berger Prologue: “Issues of managed care, mental health, and primary care development should be at the forefront of an ongoing agenda. Need to move from the morass to the matter of the drive to civilly commit sexual predators to state psychiatric hospitals. The NYSBA has consistently opposed such legislation since 1998. We were dismayed to learn of the light prison sentences given those who committed those heinous crimes. We support sentences commensurate with the crime but vehemently oppose using the mental health system as a solution to the failure of the criminal justice system. Legislation proposed redefine psychiatric illness by its creation of the category of Sexually Violent Predator, a judicial finding concerning the individual having committed a specific crime, and treating it as a mental illness for the purpose of legitimizing civil commitment under the mental hygiene laws. Such action further stigmatizes mental illness and endangers the fragile trust that persons with mental illness have in the public in the mental health system by linking it to criminal activity and substituting the role of treatment for justice in incarceration in mental hospitals.

For psychiatrists such an abuse of the mental health system is a big step back because more than most we are aware of the damage caused when the state resorts to using the mental health system and psychiatric diagnoses and treatment to accomplish political ends. Just this year a political dilemma was solved in Afghanistan when a man facing the death penalty for converting from Islam to Christianity was ultimately declared mentally ill and allowed to leave the country. In China a political dissident has been confined to a psychiatric hospital as having "delusions of grandeur, liter- ature mania, and conspicuously enhanced pathological will" since unfurling a banner critical of the Communist Party in 1992. This case reminds us of the widespread state abuse of psychiatric diagnoses, treatment, and mental hospitals in China and, in the past, in the Soviet Union to solve problems of a political nature not felt to be otherwise solvable. While our country and state should not be facilely compared to others which coopted their mental health systems to silence political dissidents, we can no longer be ignoring a potential threat which has become a political flashpoint by wrongly resorting to a psychiatric system by linking it to criminal activity and substituting the role of treatment for justice in incarceration in mental hospitals.

The Berger Commission proposed legislation meant to extend the incarceration of SVPs in mental hospitals under newly written civil commitment statutes. We ask you to resist the temptation to create a new system of civil commitment for sexual predators that is a thinly veiled application of the mental hygiene laws. NYSBA believes that any system created should include protection from liability for psychiatrists acting in good faith. It should also treat any costs incurred by such a program as a separate line in the budget lest it become an unstoppable competitive advantage for community treatment funds necessary to the carry- ing out of the State’s constitutional obligation of caring for those suffering with mentally illness.

In summary, we oppose the proposed legislation meant to extend the incarceration of SVPs in mental hospitals under newly written civil commitment statutes. We ask you to resist the temptation to create a new system of civil commitment for sexual predators that is a thinly veiled application of the mental hygiene laws. NYSBA believes that any system created should include protection from liability for psychiatrists acting in good faith. It should also treat any costs incurred by such a program as a separate line in the budget lest it become an unstoppable competitive advantage for community treatment funds necessary to the carry- ing out of the State’s constitutional obligation of caring for those suffering with mentally illness.

As we have members of Congress present, I wish to mention one last issue impacting those with mental illness and our profession. At this moment psychiatric reimbursement is slated for significant cuts unless action is taken. For example, due to a number of technical factors, the reimbursement for an initial evaluation will drop by 18% on January 1. If such a drop stands the implications are clear. There will be diminished access of elderly needing psychi- atric care, increasing numbers of psychiatrists will choose to opt out of the Medicare system, and at a time when pol- icy leaders are calling for increased numbers to train in geriatric psychiatry the incentives will become increasing perverse to the stated goal. Action to halt the cuts is needed and needed quickly.

Lloyd Sederer, M.D., Executive Deputy Commissioner for Mental Health and Mental Hygiene, expressed support for Timothy’s Law and remarked that he wishes the U.S. Congress would move towards providing full mental health parity. He also expressed his opposition to the current ver- sion of SVP legislation, particularly with respect to there being no provision requiring mental health treatment should be included as a condition of civil commitment for individuals who commit sexually vio- lent crimes.

The Westchester event concluded with remarks from Anna Dolan, M.D., Legislative Representative, who dis- cussed health care finance issues and the fis- cal problems facing New York State and across the nation.

Lloyd Sederer, M.D., Executive Deputy Commissioner for Mental Health and Mental Hygiene, expressed support for Timothy’s Law and also stated that he supports NYSBA’s position on the proposed SVP legislation. Regarding the Report of the Berger Commission, Assemblywoman Sandy Galef noted that one hospital in her district, Dobbs Ferry Hospital, has repeatedly been recommended for closure. Assemblyman Adam Bradley also expressed concern about the Berger Report and reminded that he wishes the U.S. Congress would move towards providing full mental health parity. He also expressed his opposition to the current ver- sion of SVP legislation, particularly with respect to there being no provision requiring mental health treatment should be included as a condition of civil commitment for individuals who commit sexually vio- lent crimes.

The Westchester event concluded with remarks from Anna Dolan, M.D., Legislative Representative, who dis- cussed health care finance issues and the fis- cal problems facing New York State and across the nation.

Assemblywoman Sandy Galef expressed her support for the Berger Commission Report and also stated that she supports NYSBA’s position on the proposed SVP legislation. Regarding the Report of the Berger Commission, Assemblywoman Sandy Galef noted that one hospital in her district, Dobbs Ferry Hospital, has repeatedly been recommended for closure. Assemblyman Adam Bradley also expressed concern about the Berger Report and reminded that he wishes the U.S. Congress would move towards providing full mental health parity. He also expressed his opposition to the current ver- sion of SVP legislation, particularly with respect to there being no provision requiring mental health treatment should be included as a condition of civil commitment for individuals who commit sexually vio- lent crimes.

The Westchester event concluded with remarks from Anna Dolan, M.D., Legislative Representative, who dis- cussed health care finance issues and the fis- cal problems facing New York State and across the nation.

Assemblywoman Sandy Galef expressed her support for the Berger Commission Report and also stated that she supports NYSBA’s position on the proposed SVP legislation. Regarding the Report of the Berger Commission, Assemblywoman Sandy Galef noted that one hospital in her district, Dobbs Ferry Hospital, has repeatedly been recommended for closure. Assemblyman Adam Bradley also expressed concern about the Berger Report and reminded that he wishes the U.S. Congress would move towards providing full mental health parity. He also expressed his opposition to the current ver- sion of SVP legislation, particularly with respect to there being no provision requiring mental health treatment should be included as a condition of civil commitment for individuals who commit sexually vio- lent crimes.

The Westchester event concluded with remarks from Anna Dolan, M.D., Legislative Representative, who dis- cussed health care finance issues and the fis- cal problems facing New York State and across the nation.

Assemblywoman Sandy Galef expressed her support for the Berger Commission Report and also stated that she supports NYSBA’s position on the proposed SVP legislation. Regarding the Report of the Berger Commission, Assemblywoman Sandy Galef noted that one hospital in her district, Dobbs Ferry Hospital, has repeatedly been recommended for closure. Assemblyman Adam Bradley also expressed concern about the Berger Report and reminded that he wishes the U.S. Congress would move towards providing full mental health parity. He also expressed his opposition to the current ver- sion of SVP legislation, particularly with respect to there being no provision requiring mental health treatment should be included as a condition of civil commitment for individuals who commit sexually vio- lent crimes.

The Westchester event concluded with remarks from Anna Dolan, M.D., Legislative Representative, who dis- cussed health care finance issues and the fis- cal problems facing New York State and across the nation.

Assemblywoman Sandy Galef expressed her support for the Berger Commission Report and also stated that she supports NYSBA’s position on the proposed SVP legislation. Regarding the Report of the Berger Commission, Assemblywoman Sandy Galef noted that one hospital in her district, Dobbs Ferry Hospital, has repeatedly been recommended for closure. Assemblyman Adam Bradley also expressed concern about the Berger Report and reminded that he wishes the U.S. Congress would move towards providing full mental health parity. He also expressed his opposition to the current ver- sion of SVP legislation, particularly with respect to there being no provision requiring mental health treatment should be included as a condition of civil commitment for individuals who commit sexually vio- lent crimes.

The Westchester event concluded with remarks from Anna Dolan, M.D., Legislative Representative, who dis- cussed health care finance issues and the fis- cal problems facing New York State and across the nation.
**Legislation and the Misuse of Psychiatry**

**By Barry B. Perlman, M.D.**

The New York State Psychiatric Association held its annual Legislative Meeting on Saturday, October 20, 2007, at the New York LaGuardia Airport Marriott in East Elmhurst, New York.

Dr. Perlman opened the meeting with gratitude to Richard Gallo for his long-term service and an introduction to Barry Perlman, M.D., in recognition of his service as Chair of the Legislative Committee for the years 2002-2006. Dr. Perlman thanked the Legislative Committee for its recognition.

---

**Legislative Report**

Richard Gallo, NYS Psychiatric Legislation and the Misuse of Psychiatry. Gallo reported on federal legislative developments and the Medicare Part D prescription drug program effective January 1, 2007, and reviewed various issues, including the possibility of instituting electronic prescribing systems by the State in the near future. He also discussed the recent SVP Legislation and the Misuse of Psychiatry. Gallo presented the NYSPA financial reports. Mr. Gallo reported on other open legislative business. A new CPT for treatment-resistant depression was introduced and considered by the NYSPA.

---

**Area II Trustee’s Report**

Ann Sullivan, M.D., Area II Trustee, reported that the Board of Directors of the APA approved a new policy on the prescribing of non-scheduled controlled substances. Mr. Stein also reported on changes in the Medicare prescription drug program effective January 1, 2007, and discussed various issues, including the possibility of instituting electronic prescribing systems by the State in the near future. He also discussed the recent SVP Legislation and the Misuse of Psychiatry. Gallo presented the NYSPA financial reports. Mr. Gallo reported on other open legislative business. A new CPT for treatment-resistant depression was introduced and considered by the NYSPA.
NYSPA INTERVIEW: continued from page 3

DR. VOGEL-SCIIBILLA: Yes, I think the study tells us that there is a strong link between the use of antidepressants and the development of bipolar disorder. I think it’s important to be aware of this connection and to counsel patients accordingly.

NYSPA: I think that what the study tells us is that the risk of developing bipolar disorder is higher among people who use antidepressants. The study also suggests that individuals who do not use antidepressants may be at a lower risk.

DR. VOGEL-SCIIBILLA: Yes, I think the study also suggests that the risk of developing bipolar disorder is higher among people who use antidepressants for a prolonged period. However, it is important to note that the risk of developing bipolar disorder is not the same for everyone.

NYSPA: I think that what the study tells us is that the risk of developing bipolar disorder is higher among people who use antidepressants for a prolonged period. However, it is important to note that the risk of developing bipolar disorder is not the same for everyone.

DR. VOGEL-SCIIBILLA: Yes, I think the study also suggests that the risk of developing bipolar disorder is higher among people who use antidepressants for a prolonged period. However, it is important to note that the risk of developing bipolar disorder is not the same for everyone.

NYSPA: I think that what the study tells us is that the risk of developing bipolar disorder is higher among people who use antidepressants for a prolonged period. However, it is important to note that the risk of developing bipolar disorder is not the same for everyone.

DR. VOGEL-SCIIBILLA: Yes, I think the study also suggests that the risk of developing bipolar disorder is higher among people who use antidepressants for a prolonged period. However, it is important to note that the risk of developing bipolar disorder is not the same for everyone.

NYSPA: I think that what the study tells us is that the risk of developing bipolar disorder is higher among people who use antidepressants for a prolonged period. However, it is important to note that the risk of developing bipolar disorder is not the same for everyone.