Spring 2015

Flight of Ideas A Publication of the Nebraska Psychiatric Society

A Message from the President

Dear Members,

This is my farewell message, as Dr. Praveen Fernandes will be taking over as president of NPS in May. I would like to thank you all for the opportunity to serve this year as your president. It certainly has been an eventful year! I am honored to have served you and to have helped support our profession over the past year.

Sadly, we have two recent resignations from the executive committee. Blaine Shaffer MD contributed many years of service to NPS and his contributions were valued by every member. Jane Theobald MD also resigned after many years of service. We at NPS wish them all the best in their future endeavors.

A great deal has occurred on the RxP issue since our last newsletter. First, I would like to thank each and every one of you who wrote to the Nebraska State Technical Review Committee to express your opinions on the idea of Psychologists being able to prescribe medications (RxP). Your letters did make a difference and prove that we can work together on this issue to keep the patients of Nebraska safe. At our last quarterly meeting we had the honor of hosting Timothy Tumlin PhD from Psychologists Opposed to Prescription Privileges for Psychologists. He gave a wonderful and informative presentation on this history of the RxP movement,



Julie Dickson, M.D.

and issues and concerns relevant to our cause, and ideas on how to address these issues. I would also like to thanks Drs. Beth Ann Brooks and Chelsea Chesen for attending the State Technical Review Committee hearings on this issue. To date, the Psychologists have withdrawn their proposal. We expect they will be back with a new proposal sooner rather than later. In the meantime NPS continues to work on our defense and offense for this matter. If anyone is willing to volunteer some time to help with this issue please let us know. We also will have letter writing opportunities in the future and will keep you updated on this. In addition, look for exciting new changes to our website soon.

We value your membership and we are working diligently to protect the field of psychiatric medicine. Now, more than ever, it is important to keep your membership current in NPS. Thank you all for your continued membership and support.

> Julie Dickson, M.D. NPS President

NPS CALENDAR **OF EVENTS**

April 22 **NPS Annual Meeting Omaha Marriott (Regency)** (See enclosed flyer)

May 16-20 **APA Annual Meeting**

NPS EXECUTIVE COMMITTEE MEETINGS (Executive Comm Members Only):

May 12 June 9



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Authors' opinions do not necessarily reflect the official opinion of the Nebraska Psychiatric Society.

Legislative Report:

Multiple things have been on the agenda during the current legislative session that have an impact on behavioral health in Nebraska. Governor Pete Ricketts signed LB 107, which gives Nurse Practitioners the ability to practice without a collaborative agreement with a supervising physician. One goal for the bill was to expand services to rural Nebraskans. Similar bills have been introduced in the past and have not been adopted. Though expansion of mental health services is whole heartedly supported, some have been concerned about the lack of supervision requirement and the concern that limitations on this could adversely affect patients. Passage of this bill is expected to improve behavioral health access, especially in rural parts of the state.

The Nebraska Psychiatric Society has also actively been involved in opposing a possible proposal to grant medication prescribing rights to Psychologists. Though this is allowed in three states in the US currently, there have been no scientific studies of the necessity, or impact of on patient care, of Psychologists prescribing medications to patients. Additionally, under the proposal the training required by Psychologists, as opposed to other prescribers, is very limited and there is no data on patient outcomes. At this point, the Board is opposed to this idea. NPS will continue to work to ensure superior care to Nebraska citizens by opposing proposals to grant rights to non-medical professionals that lack appropriate training.

Additionally, LB 592 was introduced this session. This bill added to the definition of mental illness by including "having a psychiatric or personality disorder". Kristin Huber, Douglas County Attorney, met with the NPS board to discuss concerns over the language change. Of concern is the potential for increasing the number of potential BOMH commitments for people leaving the correctional system, based solely on a

Assembly Representative Report:

Following are the highlights of Area 4 Spring Meeting scheduled on March 7 and 8, 2015.

- Clay Hunt Suicide Prevention for American Veterans (SAV) Act was signed into a law on Feb 12 by President Barack Obama
- Rep. Tim murphy (R-PA) is refining his comprehensive mental health reform legislation-the Helping Families in Mental Health Crisis Act-for planned reintroduction within the next month.
- The APA continues to oppose efforts by psychologist to advance legislation and related regulatory initiative to authorize crash course prescribing. In recent month proposal have been introduced in NE, ND,IA, and Hawaii. Bills remain pending in New Jersey and legislation is expected soon in Idaho.
- Assembly Reorganization: the Assembly Executive Committee (AEC) voted to adopt the new assembly structure as follows.
 - 1) No Deputy Rep. for a district branch
 - 2) District Branch rep. are eligible to

be appointed according the proposed formula (for example 450 or less members will to 900 will have

to 900 will have Syed Faiz Qadri, MD 3 Reps etc.)

- Few action papers were discussed for Assembly meeting scheduled in May 2015. Area 4 supported all 3 action papers written by Dr Sarit Hovav.
- Area 4 Council strongly encouraged to consult APA and other District Branches to seek advice if any proposal introduced by psychologists to prescribe.
- Area 4 commended NPS for our active opposition and action plan to oppose the proposal introduced by psychologist to prescribe medicine. Thank you Drs Julie Dickson, Praveen Fernandez, Jane Theobald, Chelsea Chesen and Beth Ann Brooks.

Kindest regards, Syed Faiz Qadri, MD, FAPA personality disorder without another co-occurring diagnosis. NPS is opposed to this language change, and drafted a letter in opposition to the bill



Cynthia Paul, MD

that was submitted at a hearing on the matter. The outcome of this bill is still pending. NPS will continue to try to address bills that impact the mental health system in Nebraska, and continue to advocate on behalf of patients.

> Cynthia Paul, M.D. Legislative Chair



We are pleased to report that Creighton University/University of Nebraska Team is one of the three teams to reach the finals of the Mind Games Resident Competition. This resident competition is open to psychiatry training programs across United States and Canada. The first round consists of answering 150 multiple choice questions and the top three teams are selected based on accuracy and speed.

The final round will be a jeopardy competition and will be held on May 19 at the 168th American Psychiatric Association Annual Meeting, Toronto, Canada. Our team consisting of Venkata Kolli, Rohit Madan and Varun Monga, will compete with teams from New York Presbyterian Hospital (Columbia Campus)/New York State Psychiatric Institute and New York Presbyterian Hospital (Cornell Campus) Program. The Nebraska Association of B ehavioral Health Organizations (NABHO) is a consortium of behavioral health partners which meets monthly; its mission is to promote mental health and substance abuse services for Nebraskans and advance the common aims of its member organizations. Annette Dubas from Fullerton, a former Nebraska State Senator, is NABHO's executive director.

Because American Communications Group, a registered lobbying firm based in Lincoln, provides administrative support to NABHO, it is convenient for me to serve as the NPS representative to NABHO. I work in concert with Cynthia Paul, M.D., our NPS Legislative Chair, when NABHO is reviewing legislative bills and responding to those its collective membership agrees to support or oppose. If there is a difference of opinion among member organizations, then NABHO remains neutral and simply monitors the legislative process on those bills. Two current bills are illustrative. A priority

for NABHO this legislative session is LB 21, dealing with behavioral health provider rate transfers and reporting which Senator Bob Krist introduced. Testimony supporting that bill focused on last legislative session's 2.25% provider rate increase and the fact that there is no clear way for anyone, including the Legislature, to determine if all of the appropriated dollars actually went to providers. LB 21 was not endorsed as a priority bill by any legislator, but hopefully the essence of it can be included in another bill as the Legislature moves into the final half of this year's legislative session.

Another bill of interest, LB 654, was introduced by Senator Seiler to revamp the Hastings Regional Center into a rehabilitation facility for inmates who need behavioral health services to help them transition back into their communities. NABHO's position on that bill was neutral because while the need for rehab services for inmates is very real, there was concern about supporting an institutional model rather than communitybased services. NABHO organizes an annual lobbying day, which was held on March 20



Beth Ann Brooks, M.D.

at the Capitol. I attended, spoke with senators, and observed the unicameral in session. NABHO's sole talking point was the need for a 5% rate increase for Medicaid behavioral health services. While there appears to be support for perhaps a 2% increase, the Appropriations Committee is key to the process. It is important to note that Appropriations also has to respond to a simultaneous request for a significant increase in funding by Probation. Thus, there is much to be debated and resolved before the Legislature concludes its current session on June 5.

> Beth Ann Brooks, M.D. Ethics Chair

Venkata Kolli: Laughlin Fellowship Experience

"American College of Psychiatrists" is a body of around 750 Psychiatrists who have demonstrated excellence in the field of psychiatry and achieved national recognition. The Laughlin Fellowship was launched in 1976 to recognize outstanding accomplishments by psychiatry residents in United States and Canada. Each year, The College selects ten residents deemed most likely to make a significant future contribution to the field of psychiatry.'

Venkata Kolli, a second year Child Psychiatry Fellow was awarded the 2015 Laughlin Fellowship. As part of the fellowship, he was invited to attend the 2015 American College of Psychiatrists Annual Meeting, Huntington Beach, California. He reports, 'ACP Annual meeting is an educationally rich conference attended by nationally and internationally renowned psychiatrists. The best part of the Laughlin Fellowship is its inbuilt mentorship experience. Throughout the meeting, I received formative pragmatic advice from mentors I met during the conference and its social events, on topics ranging from planning an academic career and research to forging a healthy work-life balance. I networked and learnt from fellow Laughlin awardees.

I have been fortunate to receive this honor. I am thankful for all the opportunities and mentorship I received during my residency that made this fellowship possible'.

Venkata Kolli, M.D.

For over twenty-five years, ambitious and enterprising small groups of psychologists within the American Psychological Association, have sought psychotropic prescriptive privileges in numerous states throughout the US. These well-funded psychologist groups have historically argued that they should be allowed to practice medicine without much more than an online crash-course in psychopharmacology and an even more ill-defined "Capstone" clinical preceptorship, claiming that "psychologist prescribers" (RxP'ers) are better prepared to diagnose and treat mentally ill people than primary care physicians and that their ability to prescribe will effectively help solve the rural workforce shortage of psychiatrists everywhere. The proposed additional education and training that would be required of clinical psychologists to become RxP'ers is equivalent to less than one year of medical/PA-C/ or APRN-school, and is essentially a program developed by psychologists for psychologists, with little physician oversight.

Our APA and District Branches, backed by the American Medical Association and other organizations including NAMI, have doggedly sought to shut down such proposals in order to protect the health and safety of the public. Despite this, three states have formally legitimized psychologist prescribing: New Mexico, Louisiana, and Illinois. After a decade of RxP activity in NM and LA, the RxP community has failed to publish even a single data-driven study to support their numerous claims that they have in any way, shape or form improved upon the status quo. The RxP movement marches on even against the recommendations of mainstream clinical psychology today. RxP proposals continue to pop up, and even to pummel State legislatures year after year, costing taxpayers millions of dollars. RxP legislation is on the legislative dockets in several states right now including North Dakota, New Jersey, and Idaho.

In 2014, a small team of clinical psychologists licensed here in Nebraska introduced their own RxP proposal on behalf of the Nebraska Psychological Association to our Nebraska Department of Health and Human Services, via the "407" process. This process enables the applicant group to present its proposal to the Department's "Technical Review Committee" for formal evaluation and review, which is usually the first step towards any clinically-relevant major policy change (including expansion of scope of practice for a group of clinicians) in Nebraska. The NPS and the Nebraska Medical Association were among several professional organizations closely monitoring the 407 process and offering opposing testimony and resources to Members of the Committee in order to hopefully defeat the psychologists' proposal. Last month, without any explanation, the psychologists formally withdrew their proposal.

While some in Nebraska are breathing a big sigh of relief now that the proposal has been withdrawn, experts including members of our own NPS Executive Board believe that Nebraska's battle to protect patient health and safety from RxP'ers has barely begun. Armed with significant constructive feedback from the 407 process, the psychologists are likely revamping their proposal to re-introduce it next year. Or, more ominously, they could be planning to circumvent the 407 process altogether and simply "shop" for a State Senator who might be willing to submit an RxP bill to the Unicameral next year to give future Nebraska RxP'ers prescription pads.

On behalf of the Nebraska Psychiatric Society's Executive Committee, I have compiled a list of steps each of us can take to best protect Nebraskans from the misguided RxP'er-now, and in the future.

1. Maintain your membership (or apply for renewal!) in the Nebraska Psychiatric Society, the Nebraska Medical Association, and other

professional organizations in our State that help keep our voices heard. Pay your dues and get involved.

2. Stay up-to-date on



current RxP proposals Chelsea Chesen, M.D. in other states, and learn as much as you can about the tactics that have been used by the RxP factions in the past to confuse politicians. Excellent sources easily found online include POPPP's (Psychologists Opposed to Psychotropic Prescriptive Privileges) website as well as the Department of Health and Human Services website that displays all the pertinent materials considered by the Technical Review Committee this past several months in NE: http://dhhs.ne.gov/pages/ credreviewpsychologyprescribing.aspx

3. Listen to and talk with your patients, your colleagues, and your State Senator about your reasons for opposing ANY future psychologist prescribing proposal. Clinical psychologists who wish to take on the privilege and responsibility of evaluating and managing patients medically are welcome to do so once they are educated and licensed as APRNs, PA-Cs, or MD/DOs.

4. Do whatever you can to be more accessible to our primary care colleagues in their ongoing work on the front lines with mentally-ill patients. Our willingness to help provide continuing education, curbside consults, guidance and support to them will strengthen our whole State's healthcare system. We need to join forces with our physician assistant and nurse practitioner colleagues to demonstrate to the RxP'ers that Nebraska doesn't cut corners with patient safety.

Thanks for reading...stay tuned!

Chelsea Chesen, MD FAPA Public Affairs Chair cchesen1@cox.net

NEBRASKA PSYCHIATRIC SOCIETY ANNUAL MEMBERSHIP MEETING



Wednesday, April 22

Omaha Marriott (Regency)

6:00 pm – Cash Bar

6:30 pm – Dinner Served

7:15 pm – Annual Meeting & Presentation

MENTAL HEALTH AND THE JUDICIAL SYSTEM

Featuring:

Brenda Beadle Chief Deputy Douglas County Attorney

Please RSVP by April 17, 2015: Call 402-393-1415 or email laura@omahamedical.com

We look forward to seeing you there!!

ADVANCED RESERVATIONS REQUIRED