

Maryland – Medical Liability Reform Top Legislative Priority

By Andrew Angelino, MD, Chair
MPS/SMPS Legislative Committee



SMPS Member Pat Sheehan, MD (l) shares a moment with Sen. Ida Rubin, President ProTem of the Senate. Dr. Sheehan is an active advocate for Maryland psychiatry.

This has been a very active legislative session for Maryland Psychiatry. To date, 2131 bills have been registered in the Maryland House and Senate, along with 13 joint resolutions. Each bill has been screened by members of the legislative team for language that would affect any area of mental health, e.g., access to care, confidentiality, providers, etc.

The top legislative priority for MedChi this year is Medical Liability Reform. HB 287 (cross-filed with SB 193) is a bill setting limits on noneconomic damages in medical malpractice injuries – so called “pain and suffering” compensation. These bills have been altered from

MedChi’s original proposals, but are still strongly supported by the physician groups. Furthermore, SB 436 and 438 are bills altering the way that premium rates can be set for malpractice insurance, and are receiving close attention from the legislative committee.

There are several proposals this year for deferment of punishment for non-violent drug-related crimes, mandating that convicted persons attend substance use disorder treatment instead of jail. HB 490 is an example of these, and while Maryland Psychiatry strongly supports any means to engage more individuals with substance use disorders in treatment, the legislative committee is closely following the financial impact of these proposals on the state.

A bill that has had a particularly high level of discussion is SB 98. This bill expands on the current child abuse reporting statute. SB 98 adds a fine of \$1000, and makes it a misdemeanor for any health care practitioner who obtains knowledge of the abuse or neglect of a child not to report the suspected abuse or neglect by phone within 24 hours. One must also follow up with a written report to the Dept of Health and Mental Hygiene within 48 hours. This bill has passed the senate committees with minor

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The President's Column

By Jeffrey S. Akman, M.D. President



Dwindling Dollars Cloud Psychiatry's Bright Future

For those of us who teach medical students and participate in the training of

residents there is a wonderfully familiar rhythm to the academic calendar in medicine. The year starts in July with the introduction to our hospitals and clinics of newly-minted interns and hesitant but enthusiastic third year medical students. The final week in August brings us our crop of idealistic first year medical students who seem to get younger and younger each year.

November begins the process when fourth-year medical students around the country initiate their application process and interview for residency programs culminating in the residency match in mid-March. In my capacity as chair of the GW psychiatry department I've just completed the most recent cycle of advising medical students choosing to enter psychiatry and also completed interviewing applicants from around the country who visited GW to see if we are the right match for them. It's a time when my discussions with these bright, engaging psychiatrists-to-be push me to think about our field and its future.

After years of steady decline in the numbers of medical students going into psychiatry, the trend has begun to reverse itself. Buoyed by incredible advances in neuroscience and the promise of being able to spend more than the primary care average of 7 minutes with a patient, medical students rarely seem to raise concerns about the impact of managed care, our troubled mental

health system, parity or the NIMH budget. Instead, in addition to wanting to know about the amount of supervision and night call that they can expect, the applicants that I interviewed wanted a "balance" between biological and psychosocial treatments, a diverse patient population with attention paid to learning about cross-cultural issues, a range of community experiences and strong psychotherapy training. This portends well for the future of psychiatry.

However, a more ominous issue is the decline in federally-funded psychiatrist-researchers. While most residency training programs include a research experience, the financial pressures facing most psychiatry departments and the belt-tightening in the NIMH create a significant challenge for departments in supporting residents and junior faculty who are interested in research careers. My department recently submitted an innovative proposal to the NIMH to support our efforts to train a new generation of research psychiatrists at GW. But like every other grant application submitted to the NIMH, its chances of being funded are slim.

I'm confident that our field will continue to turn out well-trained clinicians. However, if we are to continue to advance our field, one of our major policy agendas needs to be directed at finding solutions and dollars to support the development of new psychiatrist-researchers. ■



THE WASHINGTON PSYCHIATRIC SOCIETY News

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Dr. Kopolow Leads Study of Major Depressive Illness - Patients Sought

One of the sites for a multi-center head to head study of an investigational antidepressant vs. a popularly prescribed SSRI antidepressant vs. placebo will be conducted in the Washington D.C. area. Louis Kopolow, MD, Director of Associated Psychotherapy Centers, is the Principle Investigator at his treatment and research center in Gaithersburg, Maryland.

Patients who suffer from Major Depressive Illness and are in good general health may participate in this study, which provides psychiatric examination, laboratory assessment and medication monitoring, all without charge; as well as giving patients a small honorarium for their time and travel.

- Feeling sad or depressed
 - Losing interest in your usual daily activities
 - Feelings of hopelessness, worthlessness or guilt
 - Sleeplessness or lack of energy
- Have them contact Karen Ayers, Clinical Research Coordinator at 301-258-7587 to participate in this important study. ■

CME Committee Presents Robert Post, MD “Complexities in the Prescribing of Bipolar Disorder” April 19

The Washington Psychiatric Society's Continuing Medical Education Committee offers WPS members another exciting and valuable program in the 2004 series. Join us April 19, 6:30-9:30 p.m. at Ristorante Tragara, 4935 Cordell Ave. in Bethesda to hear Robert Post, MD. Dr. Post, WPS member and NIMH researcher, will share the results of his just-completed study on bipolar disorder. We will be among the first psychiatrists in the world to hear this groundbreaking report. The evening will begin with cocktails at 6:30, dinner at 7:00 p.m. followed by Dr. Post's presentation at 8:00. Use the form below to register for this event. This program is made possible by an educational grant from AstraZeneca.

Other programs in the 2004 series include:

- June 7 Donald Vereen, MD of NIDA on Substance Abuse
- September 9 Glen Gabbard, MD “Mind, Brain, and Personality Disorders”
- September 18 Medical Update. Invited speakers are Daniel Clauw, MD, Professor of Medicine at the University of Michigan, who will discuss state of the art diagnosis and treatment of fibromyalgia; Jonathan Reiner, MD Professor of Medicine at George Washington University discussing heart disease and depression; and Marvin Schuster, MD, a psychiatrist and gastroenterologist from Johns Hopkins University presenting on irritable bowel syndrome.
- November 4 WPS 55th Anniversary Awards Banquet, Cosmos Club. Keynote speaker, Michelle Riba, MD, President, American Psychiatric Association, 2004-05

Visit the WPS website www.dcpsych.org as these events draw nearer for details. Watch your mail for registration materials and more information. ■

Registration

**Complexities in the
Prescribing of Bipolar
Disorder**
April 19, 2004
6:30-9:30 p.m.

- Yes I will attend Complexities in the Prescribing of Bipolar Disorder with Robert Post, MD

Name _____

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2003 Awards Banquet Draws Full House To Honor Colleagues and Advocates



▲ As in previous years, the Cosmos Club was near overflowing at the 2003 WPS Awards Banquet. Here, part of the 100 plus in attendance listen to keynote speaker Jay Scully, MD, APA Medical Director.



(l-r) Jay Scully, MD, Michael Faenza and Jeff Akman, MD enjoy the social hour prior to dinner. Mr. Faenza, CEO of the National Mental Health Association received the WPS Paul and Sheila Wellstone Mental Health Advocacy Award for 2003. Mr. Faenza worked closely with the Wellstones and shares their commitment to improving the quality and availability of mental health care in the United States.



▲ APA President Marcia Goin, MD brought greetings to WPS from National. Joining Dr. Goin at the Banquet were a number of APA officers and candidates for national office.



▲ (l-r) Laura Van Tosh accepts the Advocate of the Year Award from WPS President-elect Rod Drake, MD as President Akman looks on. Ms Van Tosh has been a key player in improving the scope and availability of mental health services in Montgomery County.



▲ Jim Dee, MD accepts the Immediate Past President's Silver Bowl from President Akman. Dr. Dee, president in 2001-02, led WPS efforts to codify member concerns about managed care practices and was a key member of a round table series of meetings with inpatient, out patient psychiatrists and managed care leaders. His leadership helped make authorization of inpatient and partial hospitalization programs easier to obtain for practicing psychiatrists.



Catherine May, MD accepts the Immediate Past President's Award from President Akman. Two awards were presented this year to accommodate the Awards Banquet's move from May to November in 2000. Dr. May, president in 2002-03, led WPS's successful efforts to block CareFirst's proposed transition to for-profit status, guided the Society's participation in a Maryland lawsuit to protect patient confidentiality, and directed WPS efforts to ensure a full range of psychiatric services for District of Columbia public sector patients.



▲ James Griffith, MD accepts the 2003 Psychiatrist of the Year Award from Dr. Akman. Dr. Griffith, Training Director at George Washington received the recognition and accolades of his colleagues for this humanitarian work with the Center for Multicultural Human Services and his leadership in building a mental health care system amid the chaos of war in Kosovo.



▲ Harold Eist, MD accepts the 2003 APA Profile in Courage Award from APA Secretary, Nada Stotland, MD at the APA Assembly of District Branches meeting on November 15. Dr. Eist fought, at great personal and professional risk an order by the Maryland Board of Physicians Quality Assurance to turn over patient records in response to a demand by a spouse in a divorce. Dr. Eist fought victoriously to preserve his patients' rights, saying that ethics and law trump the BPQA demands.



▲ Roger Peele, MD, Area 3 Trustee gives tribute to Larry Sack, MD at the APA Assembly. Dr. Sack who died in August was a long standing WPS Representative to the APA Assembly. Noted for his unflagging, uncompromising efforts to secure patient access to care in the managed care environment, Dr. Sack was respected both nationally and locally as a champion for psychiatric patients.

*Top Legislative Priority
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amendments to preclude reporting suspected abuse or neglect that one has reason to believe has already been reported. The current interpretation of this law includes mandatory reporting of such acts that are reported to us by adult patients, even if the perpetrators of the acts are dead. Our legislative committee is working very hard to get amendments written into the bill clarifying the circumstances under which such urgent reports must be made.

Finally, while there is no bill this year to allow non-physicians to prescribe any medicines independently, there are bills that address scope of practice issues. One is HB 203/SB 247, which allows pharmacists that have an agreement with certain physicians to prescribe and dispense emergency contraception. Another bill is HB 840 that allows pharmacy benefits managers to contain costs by bargaining for medication rates. However, language in the bill suggests that the managers will be allowed clinical/therapeutic management privileges.

**Virginia Reauthorizes
Mental Health Parity;
Funds Three New PACTs**

*By Helen Foster, MD PSV/NoVA
Legislative Committee and Cal
Whitehead PSV/NoVA Lobbyist*

The General Assembly has sent SB 44 (Martin, R-Chesterfield) to Governor Warner without a single vote in opposition. The bill would make permanent the current parity law which requires insurance coverage for biologically-based psychiatric illnesses as provided for other illnesses, conditions or disorders. The legislative success of the bill demonstrates that the perception of psychiatric illness by elected officials and the public continues to improve. The passage of SB 44 is a joint effort of members of the Virginians for Mental Health Equity (VMHE), including the Northern Virginia Chapter of WPS.

With little time left in this year's General Assembly session, the fate of still other measures remains unresolved. But we expect work on the state budget to dominate the discussions over the next several weeks, with the House and Senate working to find a compromise on

their differing tax and expenditure proposals.

Governor Warner has proposed a number of funding increases to public mental health and substance abuse services, but made most of them contingent upon passage of his proposed tax increases. The Senate has approved these tax increases and more, and the House has rejected them all. This left the future of those funding streams in doubt.

The budget proposed by the House Appropriations Committee, however, resolved those doubts by removing the language making some of those appropriations contingent upon tax increases. Specifically, the House budget proposed eliminating the contingency language for the following items:

- Additional funding to discharge 77 long term mentally ill patients from state facilities. Funding is estimated to be \$70,000 per individual.
- Additional funding to purchase private psychiatric inpatient beds in community hospitals
- Additional funding for community mental health services for children and adolescents.

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IN MEMORIAM

LOUIS R. CONTE, MD, 68, died on January 27, 2004 at Suburban Hospital following complications after a stroke.

Dr. Conte was living in Bethesda MD, and has been in private practice as a psychiatrist and psychoanalyst in the Dupont Circle area of Washington D.C. for 30 years.

Dr. Conte was born May 3, 1935 in Jersey City, NJ from an Italian family. He was educated at Xavier HS in Manhattan. He went to Saint Peter's College in Jersey City and graduated from Medical School as well as took the residency training in psychiatry at Johns Hopkins University, in Baltimore MD. He served as captain in the US Army Medical Corps and was chief of the Neuro-psychiatric medical service of the 98th Medical Detachment, while in Vietnam from 1966 to 1967.

He was a staff psychiatrist at Chestnut Lodge Hospital in Rockville, MD from 1967 to 1973.

He took training in psychoanalysis and graduated from the Washington Psychoanalytic Institute in 1977.

Dr. Conte was a respected and versatile psychiatric teacher, he was a teaching and supervising mental health professional for over twenty years. He was a well regarded teaching analyst at the Washington Psychoanalytic Institute, he was instructor and associate clinical professor at George Washington University School of Medicine; he was faculty member of the Washington School of Psychiatry, and the Saint Elizabeths Hospital Residency Training Program.

He had been a member of the Washington Psychiatric Society and the Curriculum and the Ethics Committee for the Washington Psychiatric Society and the Curriculum and the Candidate Progress committees of the Washington Psychoanalytic Institute.

He will be remembered for his enthusiasm for life and for people, and for his strong intellectual

curiosity. Everyone who knew him in person can not forget how he welcomed you and how he hugged you with love and with interest for your life.

His Italian heritage did not fade away with age but was alive and well nourished by his interests for the Italian style of living as well as Italian food. He loved music and musical organizations.

Dr Conte was married to Barbara McIntosh Conte for 27 years. They had two children from their marriage: the first born Marc is a student in the Economics and Environmental Science doctoral program at the Donald Bren School at the University of California School at Santa Barbara. Their second daughter, Larissa is a senior at Stanford University in Palo Alto, California.

Dr. Conte will be missing from our community and from my family. Sleep in peace dear LOUIS!
By Erminia Scarcella, MD

GERTRUDE R. TICHO, MD, 83, a Washington psychoanalyst and a Clinical Professor of Psychiatry at George Washington University School of Medicine, died of cardiac disease Feb. 10 at her home in Chevy Chase, MD.

Dr. Ticho was born Gertrude Ruth Hollwarth in Vienna, Austria and graduated from the University of Vienna Medical School in 1944. She completed psychoanalytic training at the Vienna Psychoanalytic Institute after World War II, and emigrated to Sao Paulo, Brazil in the late 1940s.

In 1956, Dr Gertrude married Dr. Ernst Ticho, a concentration camp survivor, whom she had met during their psychoanalytic training in Vienna. They moved to Topeka, KS, where both joined the staff of the Menninger Clinic. She became a supervising and training analyst in child and adult psycho-

analysis. From 1969 to 1974, she was director of the Topeka Psychoanalytic Institute.

Dr. Ticho and her husband Ernst moved to the Washington area where they both supervised and trained analysts at the Baltimore-Washington Psychoanalytic Institute and at the Washington Psychoanalytic Institute. They both maintained private psychoanalytic practices.

Dr. Gertrude Ticho was well-known as a gifted teacher. She received the 1980 Faculty Award as Teacher of the Year from the Department of Psychiatry at George Washington University School of Medicine.

Otto Kernberg, past president of the International Psychoanalytic Association, said of Dr. Ticho that "her original contributions to psychoanalytic theory and technique centered on the problems of culture shock and on self-analysis. She wrote classical contributions to the understandings and misunderstandings that may evolve when analysts and their patients proceed from different cultural expectations."

Dr. Ticho and her husband, Ernst who died in 1996, collected German expressionist art. Survivors include one sister. ■



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Announcing the 10th Annual Self Psychology Conference of the Institute of Contemporary Psychotherapy and Psychoanalysis: **RACE AS A SOCIAL CONSTRUCTION: POSTMODERN AND RELATIONAL PERSPECTIVES**, with **ADRIENNE HARRIS, DAVID ENG, SHINHEE HAN, AND JANICE GUMP**. Saturday, April 17, 2004. 8:15am – 5:00pm. Conference includes continental breakfast and lunch. Conference Fees: ICP&P members \$125 (\$140 after 3/26/04), Nonmembers \$150 (\$165 after 3/26/04), Students \$50 (\$65 after 3/26/04). Plus a Pre-Conference Workshop (sponsored by ICP&P's Psychoanalytic Training Program): **Ethnic Factors in Exploratory Psychotherapies with Joseph Lichtenberg**. Friday, April 16, 4:00pm – 6:00pm. Pre-Conference Costs: Free to ICP&P members, Non-Members \$25, Students, \$15. **Location: Key Bridge Marriott, 1401 Lee Highway, Arlington, VA.** Some scholarships available. To register, send name, address, phone number and check payable to ICP&P to 3000 Connecticut Ave, NW, #108A, Washington, DC 20008. To request a brochure, e-mail icpeastadmin@worldnet.att.net or call 202-686-9300 x4.

April 24, 2004 5:00-6:30pm Howard Shevrin, Ph.D., "The Psychoanalytic Theory of Drive in the Light of Recent Neuroscience Findings and Theories", Samuel Goldberg, M.D., discussant. Sponsored by the Baltimore-Washington Institute for Psychoanalysis Inc. www.bwanalysis.org

Or call 410-792-8060 or 301-470-3635

Baltimore Film Series – The Baltimore Museum of Art – Fridays, 7:30 p.m.

- April 23 - **Frida**, Discussant, Joseph Bierman, M.D.
- April 30 – **The Hours**, Discussant, Barbara Young, M.D.
- May 7 – **Eyes Wide Shut**, Discussant, Allan Gold, M.D.
- May 14 – **One Hour Photo**, Discussant, George Gallahorn, M.D.

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larger doctor's office with private bathroom, couch, bookshelves, chairs, desk, credenza, file, etc. Available after July 1, 2004. Other options and alternatives are also available. Phone Thomas Webster, MD 202-775-9730.

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50 Year Distinguished Life Fellows

Congratulations to these WPS members on attaining 50 year Distinguished Life Fellow status. They will be honored in the Convocation Program of the APA Annual Meeting in New York Monday, May 3, 2004.

Bennett Olshaker M.D.
George W. Roark, Jr., M.D.
Aldon N. Roat, M.D.
Robert H. Robertson, M.D.
Sanford Louis Billet, M.D.
Robert D. Lincoln, M.D.
Ai Ding Fang, M.D.
Naomi K. Wenner, M.D.
Rafael A. Delgado, M.D. ■

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Low Fee Treatment Program, Referrals, Community Outreach

Top Legislative Priority

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- Additional funding for three new programs of assertive community treatment (PACT) for people with serious mental illnesses in the community.
- No cuts to CSBs
- The House and Senate agreed to fully fund the Governor's "Olmstead Initiative", which provides new funding for a variety of services for those with mental disabilities, including the proposed \$4 million for community-based children's mental health services (\$2 million each year of biennium).

The Senate added the following proposals:

- Restore \$1 million cut from the state maintenance of effort funds for substance abuse treatment in the current year of funding to ensure that Virginia is eligible for full federal funding for substance abuse treatment programs
- Included an additional \$2.5 million for early intervention services

- Carved out anti-depressants and anti-anxiety medications from the Medicaid preferred drug list. This means that Medicaid fee-for-service patients will not have to go through any prior authorization process to have access to these medications. The House did not include this carve-out.

At press time, the Senate and House of Delegates have developed competing budgets that are very different in their approach to revenue and spending. The proposed budgets are \$3.5 billion apart. The Senate has proposed a broad tax package that would raise the sales tax from 4.5 percent to 5.5 percent, reduce the food tax, change the income tax to lower taxes for most but an increase in taxes on those with incomes of \$100,000+, and a substantial increase in the recordation tax. In total, the bill would generate revenues of approximately \$1.8 billion a year. The House muscled through a \$58 billion two-year budget that avoids broad tax increases, cuts into transportation, and delays raises for state workers.

For more information on any of these issues or questions about

organized psychiatry's advocacy efforts, please contact us at cwhitehead@whiteheadconsulting.net.

In the District of Columbia, City Council will hear legislation to:

- Establish the AccessRx Program to require drug manufacturers that sell prescription drugs through a publicly funded pharmaceutical assistance program to enter a rebate agreement with the District (Catania and Allen)
- Require the Mayor to provide notice to affected Advisory Neighborhood Commissions within 10 days of receipt of an application for a Certificate of Occupancy to install a community-based residential facility (Ambrose)
- Establish the "District of Columbia Equal Access to Health Insurance Act" to expand the availability of health insurance to all residents of the District and to persons employed by employers located within the District (Cropp, at the request of the Mayor)

These bills will be heard in March and April. A report will come in the May/June issue of WPSNews. ■

