# Texas Psychiatrist

2005 Legislative Session

### It's Over!

he 79th Legislature ended its 140-day session on May 30 after passing almost 1,600 bills and resolutions. During the course of the 2005 Legislative Session, the Federation tracked 213 bills that could effect psychiatric care and the practice of psychiatry. Of this total, 51 bills were passed and sent to the Governor.

Overall, the session was a positive one for psychiatry and psychiatric patients. The positive outcome can be attributed in part to the essential grassroots advocacy programs conducted by the Federation's coalition partners (TSPP, Academy, TSCAP, and TMA) during the legislative interim. Forming relationships with legislators and informing them about issues of importance to psychiatry during the interim period resulted in a more informed legislature about mental health issues. Also contributing to the positive outcome were the members who came to Austin to participate in Capitol Day and to visit with members of the legislature during the course of the session. Also contributing to our success were members who responded to requests to testify before various legislative committees, often on very short notice. And finally, the Federation's lobbyist, Steve Bresnen, kept our interests before members of the Legislature and fought hard for our issues. As a result of this preparatory work and vigilance during the session, the Federation did not have to issue any legislative alerts during the session....the first time this has occurred.

Another first occurred during the session. On May 18, the Texas Senate passed a Resolution recognizing the Texas Society of Psychiatric Physicians (see page 8).

The following is a summary of some of the bills tracked by the Federation that were passed by the Legislature. The bills may be read in their entirety by visiting the Federation's website (www.txpsych.org) and selecting "Read Bills from the Current Legislative Session" within the Public Policy link.

#### **Foster Care**

SB 6 by Senator Jane Nelson and Rep. Suzanna Hupp brings major reforms to child protective services in a 257 page bill. Prior to the start of the 2005 Legislative Session, the media carried numerous stories about failures of the foster care system Included in these stories were accounts of inappropriate prescribing of psychoactive medications to children in the foster care system. Compounding the effect of these media accounts were pronouncements by the FDA about potential dangers of prescribing psychoactive medications to chil-

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dren. These media accounts became the focus of various anti-psychiatry groups to seek legislative reform to ban or at least restrict the administration of psychoactive medications to children. This misguided effort to single out psychiatric care as a major problem of the foster care system was directly confronted by the Federation and its coalition partners, including numerous child and adolescent psychiatrists with experience in the foster care system. The Federation coordinated a lobbying effort involving numerous medical specialty organizations, foster care providers and mental health advocacy organizations which sought to ensure that psychiatric care be considered as "medical care" and that psychotropic medications not be singled out but instead should be considered as a component of "medical care." These efforts to integrate psychiatric care into medical care were successful and should be a model for future attempts to separate psychiatric care from medical care.

SB 6 was signed into law by the Governor with an effective date of September 1, 2005. The new law calls on the Health and Human Services Commission to collaborate with health care and child welfare professions to design a comprehensive, costeffective medical services delivery model which will include the following: a) the designation of health care facilities with expertise in the forensic assessment, diagnosis, and treatment of child abuse and neglect as pediatric centers of excellence; b) a statewide telemedicine system to link investigators and caseworkers with pediatric centers of excellence or other medical experts for consultation; c) identification of a medical home for each foster child at which the child will receive an initial comprehensive assessment, as well as preventive treatments, acute medical services, and therapeutic and rehabilitative care to meet the child's ongoing physical and mental health needs throughout the duration of the child's stay in foster care; d) the development and implementation of health passports which will include information such as the name and address of a child's physicians and health care providers, a record of each visit to a physician or other health care provider, a list of the child's known health problems and allergies, and information on all medications prescribed to the child in adequate detail to permit refill of prescriptions; e) the establishment of a management information system that allows monitoring of medical care that is provided to all children in foster care; f) the use of medical advisory committees and medical review teams to establish treatment guidelines and criteria by which individual cases of medical care provided to children in foster care will be identified for further, indepth review; g) the development of a training program for persons authorized to provide medical consent; h) a provision for the participation of the person authorized to consent to medical care for a foster child in each appointment of the child with the provider of medical care; and, i) a provision for the summary of medical care to be

A foster child who is at least 16 years of age may consent to the provision of medical care if the court with continuing jurisdiction determines that the child has the

reviewed by the court.

capacity to consent to medical care. If a child who is at least 16 years of age and who has been determined to have the capacity to consent to medical care refuses to consent to medical care and the responsible agency for the child believes that the medical care is appropriate, the agency may file a motion with the court requesting

an order authorizing the provision of medical care. The motion must include a statement prepared and signed by the treating physician that the medical care is the proper course of treatment for the foster child.

The only reference to psychotropic medications is a section in the bill that requires the Department of State Health Services to study the level of care system the department uses to determine a child's foster care needs to ascertain whether the system creates incentives for prescribing psychotropic medications to children in foster care.

#### **State Board of Medical Examiners**

Through the sunset process, the State Board of Medical Examiners was continued with the enactment of SB 419 introduced by Senator Jane Nelson and Rep. Burt Solomons. The Governor has signed the bill into law with an effective date of September 1, 2005. TSPP was an active participant during the sunset review process, submitting recommendations for reform (*Texas Society of Psychiatric Physicians Newsletter*, August/September 2004, page 4).

The bill renamed the Board to the Texas Medical Board and defined procedures that may improve due process of physicians who are investigated based upon complaints received by the agency.

#### Mental Health

HB 224 by Rep. Frank Corte and Senator Florence Shapiro allows a facility to continue treatment of a patient who is younger than 18 years of age as a voluntary patient if the patient's parent, managing conservator or guardian objects to the patient's written request for discharge. The bill also allows for the administration of psychoactive medication to a patient who is younger than 18 years of age if the patient's parent, managing conservator or guardian objects to the patient's refusal the administration of a psychoactive medication.

HB 2572 by Vicki Truett and Senator Kyle Janek restricts the Health and Human Services Commission from decreasing the number of local mental health authorities from the number that existed on January 1, 2005 except on: a) a request from two or more local authorities; or b) a determination that a local authority has substantially failed to meet the terms and condition of the performance contract. A local mental health authority may serve as a qualified service provider (an entity that meets requirements for service providers established by the Health and Human Services Commission) and make every reasonable attempt to solicit the development of an available and appropriate provider base that is sufficient to meet the needs of con-



sumers in its service area.

SB 325 by Senator Judith Zaffirini and Rep. Elliot Naishtat prohibits restraints that: a) obstructs a patient's airway, including a procedure that places anything in, on, or over the patient's mouth or nose; b) impairs the patient's breathing by putting pressure on the torso; or, c) interferes with the resident's ability to communicate. A prone or supine hold may be used only if the person administering the hold: a) limits the hold to no longer than the period specified in rules to be promulgated; b) uses the hold only as a last resort when other less restrictive interventions have proven to be ineffective; and, c) uses the hold only when an observer, who is trained to identify the risks associated with positional, compression, or restraint asphyxiation and with prone and supine holds who is not involved in the restraint, is ensuring the patient's breathing is not impaired. The Health and Human Services Commission is to develop rules to: a) define acceptable restraint holds that minimize the risk of harm to a patient; b) govern the use of seclusion of patients; and, c) develop practices to decrease the frequency of the use of restraint and seclusion.

SB 826 by Senator Leticia Van de Putte and Rep. Garnet Coleman authorizes the Health and Human Services Commission to conduct a study examining the feasibility and effects of providing 12 months of health services under the Medicaid program to women who are diagnosed with postpartum depression and who are eligible to receive Medicaid services.

SB 1340 by Senator Frank Madla and Rep. Dianne Delisi authorizes the Health and **Human Services Commission to implement** a pilot program under which Medicaid recipients in need of mental health services are provided those services through telehealth or telemedicine. The pilot program must be designed to: a) enhance the delivery of mental health services to recipients; b) ensure adequate supervision of social workers, psychologists, and other licensed professionals who are not psychiatrists and who provide services through the use of telehealth or telemedicine; and, c) enable the state to determine whether extension of the use of telehealth or telemedicine would improve the delivery of mental health services. The Commission is to adopt rules setting minimum standards to permit the use of trained qualified mental health professionals in presenting Medicaid recipients for telehealth or telemedicine consultations to be conducted by psychiatrists at distant sites. The Texas State Board of Medical examiners is to adopt rules to establish requirements for a physician delegating a

continued on page 3

# It Takes a Psychiatrist...

Gary L. Etter, MD, President, Texas Society of Psychiatric Physicians

ast year, my predecessor, Dr. Clay
Sawyer, established as his theme: "It
takes a physician...," which basically underscored the need for a physician to be a psychiatrist. This certainly was an appropriate
theme as we entered a legislative year, and
faced another effort by the psychologists to
obtain prescribing privileges. This year, I
wanted to expand on that theme. It does
take a physician... to be a psychiatrist, and
it takes a psychiatrist... to be involved.

We now have the structure established for organized medicine and psychiatry in Texas that allows ALL psychiatrists to join and be involved in making the decisions that affect psychiatry in Texas. The Federation of Texas Psychiatry, an organization of organizations, was established to provide a unified voice for psychiatry. It includes TSPP, the Texas Academy of Psychiatry, the Texas Society of Child and Adolescent Psychiatry, the Texas Foundation for Psychiatric Education and Research and now we are extremely happy to announce that it also includes the organizational membership of the Texas Medical Association. This underscores the strong alliance that psychiatry has had with the TMA, which has been very helpful to TSPP over the years. We are now able to go to our legislators as a member organization of the Federation, and say that we represent the majority of psychiatrists in Texas, and over 40,000 physicians in Texas who are supportive of continuing to provide the highest quality of psychiatric treatment in Texas. The Texas Academy of Psychiatry has also been established to provide an organization for those psychiatrists, who may have not been involved in organized psychiatry for years, and for various reasons, have chosen not to be a member of APA/TSPP.

The legislative session is now over, and we have had one of our most successful ses-

sions for advocacy. With our reorganization, our Chair of Government Affairs, Dr. Martha Leatherman, our skilled and dedicated lobbyist, Steve Bresnen, and all of the many members who have been active in meeting with our legislators, have said that this has been one of the most successful legislative years ever. The psychologists were not even able to find a sponsor for their prescribing bill, whereas in the last two sessions, they were able to find a sponsor, and were able to get a bill to committee. I believe it has everything to do with the strength of our unified voice in our lobbying efforts. It also is a result of the relationships that we have established with our elected officials. They know who their constituents are, and they quite frankly have told us that they listen to Texans who know what is best for Texans. As we have said many times: "All politics is local." It requires a strong local district branch with strong local leadership.

The strength of our organization is based on various factors. First and foremost is a strong staff who is working daily for the organization. We have without doubt the most qualified and committed Executive Staff of any of the District Branches of the APA. John Bush and Debbie Sundberg work tirelessly for the organization. I am convinced that they do not see this as much as a job, but as a commitment to what they feel is best for our patients. I have said many times that those of us who have been the most involved in TSPP still would not have the time required to run the day to day operations of the organization. We all have very busy practices, and the majority of us practice away from Austin. We all are deeply indebted to these two individuals.

We are also strong because of our members. TSPP is truly member driven. Our members volunteer for committees. Our committees discuss issues and develop



action papers which are then sent to our Executive Council for consideration. It is a simple system that works. The decisions are not made by a small group of individuals behind a closed door. When I have attended these meetings over the years, I am amazed at the fact that there are so many previous Presidents of the organization who remain actively involved, and there are so many who have remained committed over the years by serving on various committees. What motivates these people? I believe it is out of a true commitment to service. They are not here to list it on their C.V., or to "move up the ladder" in organized medicine. It is not self-serving, and certainly shouldn't be. I believe that it is out of a commitment to do whatever is necessary to continue to provide the best care that we can to our patients. I want to thank those of you who have served over the years.

The conflict between the APA and TSPP continues. I want to go on record by saying that I am supportive of resolving this conflict in a way that would preserve the long relationship between the two organizations. However, I am not going to do anything that would jeopardize TSPP. I feel that the APA is only as strong as its district branches. In the long run, the steps that we have taken to maintain and strengthen TSPP should only serve to benefit the APA. When I along with the other officers assumed office this April, we took an oath which included having a fiduciary responsibility to the organization. To ignore this would also serve to ignore the Texas laws for non-profit organizations. To ignore the membership trends of the last several years, or to repeatedly try methods of



Gary L. Etter, MD

membership recruitment and retention which have not worked, would also be considered not being responsible. None of us could stand idly by and do nothing. We are indebted to our three APA Assembly Representatives for their hours of hard work in the negotiations. These members include: Dr. David Axelrad, Dr. Priscilla Ray, and Dr. Clay Sawyer. TSPP has continually called for mediation in this matter if negotiation failed. This was also recommended unanimously in an action paper by the APA Assembly in November 2004. Until recently, the APA has resisted mediation. However, they are now willing to move to what they are calling "assisted negotiation," with a third party for one day. We want to move to resolving this issue so that both organizations can focus their time and energy on more important

I would hope that you would embrace this year's theme of "It takes a psychiatrist to be involved." I would invite every psychiatrist in Texas to do so. If you are not on a committee, please consider joining one in your area of interest. If you are on a committee, please attend your meetings. Our TSPP Annual Convention and Scientific Program is November 4-6 at the Hyatt Regency Hotel in Austin. Dr. Bud Holcomb has arranged a very interesting and informative program: "The Dynamic Spectrum of Clinical Psychiatry." Please begin making plans now to attend. I thank you again for the opportunity to serve as your President and ask for your support in the coming year.

# The Latest News from the Academy

R. Sanford Kiser, MD, President, Texas Academy of Psychiatry

The Texas Academy of Psychiatry had its first meeting in Dallas this April. In operation for approximately 6 months, the Academy has been involved in basic startup activities.

The creation of the Academy was in response to survey results that found that over 80% of Texas psychiatrists who were not members of either TSPP or APA wanted to be a part of organized psychiatry. Many of the respondents indicated that they wanted to be involved at the state level. That finding was important, for it revealed the existence of a critical need that was not being met. In light of the fundamental maxim that "All politics is local," Texas psychiatry had to respond.

One means to fill that void was the creation of the Academy. Another element has been the creation of the Federation of Texas

Psychiatry, an organization of organizations. The Federation – comprised of the Texas Society of Psychiatric Physicians, the Texas Academy of Psychiatry, the Texas Foundation for Psychiatric Education Research, the Texas Society of Child and Adolescent Psychiatry, and the Texas Medical Association – has established a powerhouse of critical mass and thereby created a powerful aggregate voice. The recently concluded successful legislative session has been the first fruits of this effort.

The Texas Academy of Psychiatry has now completed routine startup functions, such as adoption of bylaws, election of officers, incorporation as a Texas nonprofit corporation, establishment of an IRS Federal Identification Number, etc.

Recruitment for membership in the Academy continues to be on an informal



grassroots basis, with person-to-person contacts as the basis for communication. We have been gratified to see signs of a "halo" effect from these developments, with membership interest in both TSPP and the Academy increasing.

The next stage of development of the Texas Academy of Psychiatry will include organization of committees and planning for future meetings.

The Academy has no plans to take positions on social issues. Instead as stated in our bylaws, we will be a resource in the



R. Sanford Kiser, MD

State of Texas to advance the interests of our profession, to improve the treatment of the mentally ill, to advance the standards of all psychiatric facilities and services, to promote psychiatric research and education, to establish cooperation among all parties interested in mental health, to educate the public, to advocate for our members and their patients, and to work in concert with all interested parties in advocating for eliminating barriers and stigmas adversely affecting persons with mental illness.

# **Federation Update**

Conway McDanald, MD, Chairman, Federation Delegate Assembly

The Federation of Texas Psychiatry, a coalition of professional organizations united in advocacy for quality psychiatric care, is pleased with the outcome of its inaugural Legislative Session. The united and strong voice of the Federation was recognized by the Texas Legislature in 2005, resulting in legislation that was generally supportive of quality psychiatric care (see page 1).

The Federation continues to grow. Joining the Federation recently as an Associate member was the Texas Medical Association. The TMA's support of the Federation reflects their strong support of psychiatry in Texas. The voting members of the Federation now include the Texas Society of Psychiatric Physicians, the Texas

Academy of Psychiatry, and the Texas Society of Child and Adolescent Psychiatry. The Texas Foundation for Psychiatric Education and Research is an Associate member.

The Federation launched its website in May, providing each member organization an opportunity to publish information of importance to members and the public. If you haven't visited the website (www.txpsych.org), we encourage you to do so.

The Federation is pleased with the response by psychiatrists in Texas to the Federation's relationship with the Cunningham Group. The relationship was formed to help psychiatrists identify and obtain malpractice insurance. Hundreds of psychiatrists have already responded to this

the American Board of Psychiatry and

Neurology with added or special qualifica-

ence or training consisting of: a) at least 24

tions in forensic psychiatry and have experi-

hours of specialized forensic training relating

to incompetency or insanity evaluation; b) at

least five years of experience in performing

c) eight or more years of continuing educa-

tion relating to forensic evaluations. In addi-

tion, a psychiatrist appointed by the court as

an expert must have completed six hours of

required continuing education in courses in

forensic psychiatry in the 24 months preced-

defendant's sanity is submitted, the jury or

judge, depending on who is the trier of fact,

whether the defendant is guilty, not guilty, or

not guilty by reason of insanity. The judge or

shall determine and specify in the verdict

ing the appointment. If the issue of the

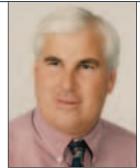
criminal forensic evaluations for courts; and,



program. Additional information about the malpractice program is included on the Federation's website.

The Federation is also pleased to announce that it has launched a Job Bank on its website. The Federation invites corporations, organizations and individuals to post career opportunities on the Job Bank that may be of interest to Texas psychiatrists. Check it out.

The Federation Delegate Assembly has voted to approve an amendment to its



Conway L. McDanald, MD

Bylaws requested by the Delegates from TSPP. The TSPP Delegates requested the amendment to help clarify the mission of the Federation which has been misunderstood by the American Psychiatric Association. In taking this action, the Federation is hopeful that it will help end the dispute the APA has with TSPP over its participation in the Federation.

#### **2005 Legislative Session — It's Over!** continued from page 1

service to be performed by a qualified mental health professional who is authorized to be a telepresenter.

#### Legal

HB 291 by Rep. Tony Goolsby and Senator John Carona allows a court to release to a victim or victim's guardian or close relative information about a defendant acquitted by reason of insanity, including name, address and telephone number.

HB 2518 by Rep. Garnet Coleman and Sen. Robert Duncan requires that a mental health court must: a) ensure a person eligible for the mental health court program is provided legal counsel before volunteering to proceed through the program and while participating in the program; b) allow an eligible person to choose whether to proceed through the mental health court program or proceed through the regular criminal justice system; c) allow a participant to withdraw from the mental health court program at any time before a trial is initiated; d) provide a participant with a court-ordered individualized treatment plan indicating the services that will be provided to the participant; and e) ensure that the jurisdiction of the mental health court extends at least six months but does not extend beyond the probationary period for the offense charged if the probationary period is longer than six months.

SB 837 by Senator Jeff Wentworth and Rep. Terry Keel requires that a person acquitted by

reason of insanity may not be committed to a jury shall determine that a defendant is not mental health facility or ordered to receive guilty by reason of insanity if: a) the prosecuoutpatient or community-based treatment tion has established beyond a reasonable for a cumulative period that exceeds the doubt that the alleged conduct constituting the offense was committed; and, b) the maximum term provided by law for the offense for which the acquitted person was defense has established by a preponderance of the evidence that the defendant was tried. On expiration of the maximum term, the acquitted person may be further confined insane at the time of the alleged conduct. The in a mental health facility or receive outpajury may not be informed of the consetient or community-based treatment under quences to the defendant if a verdict of not civil commitment proceedings. Psychiatrists guilty by reason of insanity is returned. or psychologists appointed by the court to conduct examinations pertaining to the **Economic** HB 386 by Rep. Dan Gattis and Senator insanity defense must be licensed in Texas. Psychiatrists appointed must be certified by

HB 386 by Rep. Dan Gattis and Senator Steve Ogden requires a pharmacy to offer a patient the option of paying for the prescribed medication at a lower price instead of paying the amount of the copayment, if the price is lower than the amount of the patient's copayment.

HB 1771 by Rep. Dianne Delisi and Senator Jane Nelson requires that the Health and Human Services Commission develop an integrated care management model of Medicaid managed care. The model is to be a non-capitated primary care case management model.

HB 2678 by Rep. John Smithee and Senator Kel Seliger prohibits an insurer that writes professional liability insurance for physicians from considering whether, or the extent to which, a physician provides services to individuals who are recipients of Medicaid or covered by the child health plan program, including any consideration resulting in: a) denial of coverage; b) refusal to renew coverage; c) cancellation of coverage; d) limitation of the amount, extent, or kind of coverage available; or, e) a determination of the rate or premium to be paid.

SB 50 by Senator Jane Nelson and Rep. Larry Taylor allows a physician of a health maintenance organization or a preferred provider to request that the contract of the insurer or insurer's clearinghouse may not refuse to process or pay an electronically submitted clean claim because the claim is submitted together with or in a batch submission with a claim that is not a clean claim.

#### **Allied Health**

Sunset bills re-authorizing the licensing of psychologists (HB 1015), professional counselors (HB 1283), social workers (SB 415), and marriage and family therapists (HB 1413) all passed without expansions in scope of practice.

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#### **TSPPs CME Accreditation**



On May 4, the Texas Medical Association conducted a CME re-accreditation site survey of the Texas Society of Psychiatric Physicians. TSPP was the first medical specialty society and the only one accredited by TMA between 1986 and 2005. Since its initial provisional accreditation in 1986, TSPP has been re-accredited with full accreditation status in 1993, 1997 and 2001. Pictured are persons involved in the re-accreditation site survey: (first row left to right) Billie Dalrymple, TMA CME Director and Accreditation Surveyor, Debbie Sundberg, TSPP Assistant Director, Rege Stewart, MD, TSPP Immediate Past CME Committee Chair and Consultant, (second row left to right) Conway McDanald, MD, TSPP CME Committee Chair, Jefferson Nelson, MD, Past CME Committee Chair and Consultant to the CME Committee, and Mark Gregg, MA, TMA Accreditation Surveyor.

#### **Call for Nominations**

The 2006 Texas Society of Psychiatric Physicians' Annual Convention and Scientific Program will be held November 3-5, 2006 at the Westin Galleria Hotel in Dallas, Texas.

TSPP members interested in being considered for appointment as the 2006 Scientific Program Chair should submit a brief resume outlining qualifications and knowledge of the CME process by August 1, 2005.

As the Scientific Program Chair you will be appointed to the CME Committee and, in consultao0tion with the CME Committee, identify topics of interest expressed by the membership, write the program's objectives, develop the content, and select appropriate speakers for the program. You will be responsible for promoting the meeting to the membership by articles in the *Texas Psychiatrist* and notices to Chapters.

In addition, as Scientific Program Chair you will be nominated as TSPP Vice President and be appointed to the TSPP Executive Committee. As a member of the TSPP Executive Committee you will be responsible for participation in Executive Committee meetings and telephone conference calls required to conduct business between Executive Council meetings.

On-site at the Scientific Program, you will preside over 1% days of the CME Program and assist in the introduction of speakers and keeping the program on schedule.

 $Additional\ information\ may\ be\ obtained\ by\ contacting\ the\ TSPP\ Office\ at\ 512/478-0605.$ 

The TSPP CME Committee will receive and review applications for the position of TSPP Scientific Program Chair and forward recommendations to the TSPP Nominating Committee. The Nominating Committee will review the applications and forward its recommendations for approval to the Executive Council.

#### Deadline for Submission of Applications: August 1, 2005

Send your resume to:
Texas Society of Psychiatric Physicians
401 West 15th Street, Suite 675, Austin, Texas 78701
or, fax it to 512/478-5223 or send it by email to TSPPofc@aol.com.



Texas Society of Psychiatric Physicians

# 2005 Annual Convention and Scientific Program

he 2005 TSPP Annual Convention and Scientific Program to be conducted at the Hyatt Regency Hotel in Austin on November 4-6 features an outstanding program offering 10 Category I credits, including 2 hours of credits in medical ethics. The program, "The Dynamic

Spectrum of Clinical Psychiatry," features the following speakers: Larry Ereshefsky, PharmD, Kevin Gray, MD, Laurence McCullough, PhD, Charles Raison, MD, Zachary Stowe, MD, and Karen Dineen Wagner, MD, PhD.

In addition to the Scientific Program, on

November 4, the TSPP committees will meet and TSPP will conduct its Annual Awards Banquet, this year recognizing Bernard Gerber, MD of Houston (TSPP Distinguished Service Award), Robert M.A. Hirschfeld, MD of Galveston (TSPP Psychiatric Excellence Award), and Steve

Bresnen of Austin (TSPP Special Service Award).

On November 5, the Annual membership meetings of TSPP and the Texas Foundation for Psychiatric Education and Research will be conducted. Also, the TSPP Executive Council will meet.

#### DAILY SCHEDULE

#### **SATURDAY, NOVEMBER 5 FRIDAY, NOVEMBER 4** 4:00 pm - 4:15 pm Refreshment Break w/Exhibitors 7:00 am - 8:00 pm Registration/Information 7:30 am - 6:00 pm Registration / Information 5:30 pm **Exhibits Tear Down** 7:30 am - 8:30 am **Complimentary Continental** 7:30 am - 6:00 pm Committee Meetings Breakfast for Program 5:40 pm - 7:00 pm **Executive Council** 12:00 pm - 1:15 pm Member Luncheon Registrants w/Exhibitors 12:00 pm - 5:00 pm **Exhibits Set-Up** 7:30 am - 5:30 pm **Exhibits SUNDAY, NOVEMBER 6** 8:45 am - 5:15 pm Scientific Program 7:30 am - 1:00 pm Registration / Information 6:00 pm - 7:30 pm Exhibits Open / Welcome Reception Refreshment Break **Complimentary Continental** 10:30 am - 10:50 am 7:30 am - 9:00 am Breakfast for Program with Exhibitors w/Exhibitors Registrants 12:20 pm - 2:00 pm Annual Business Meeting / 7:30 pm **Annual Awards Banquet** Scientific Program Luncheon w/Exhibitors 8:00 am - 12:20 pm

Scientific Program Schedule available online at www.txpsych.org or to request additional information, contact TSPP at tsppofc@aol.com or call 512-478-0605.

#### **MEETING LOCATION**

The Annual Convention and Scientific Program will be held November 5-6, 2005 at the Hyatt Regency Austin Hotel, 208 Barton Springs Road, Austin, Texas. Conveniently located in the heart of Austin's business district near the State Capitol, the hotel offers breathtaking views of Town Lake and the glittering Austin skyline. Make plans for a relaxing and stimulating weekend enjoying the many activities TSPP has arranged, including an outstanding CME program. During your leisure time, enjoy the outdoor heated pool and spa, fitness center and nine miles of beautifully landscaped hike n' bike paths on the shores of Town Lake. A short distance away is shopping, historic 6th Street and the Warehouse Entertainment District. We know this will be a meeting and weekend you will not want to miss!

#### DISCOUNTED REGISTRATION FEES

TSPP has arranged a special discounted rate for program registrants at the rate of \$149.00 single or double occupancy. Hotel reservations may be made by referring to the group name "Texas Society of Psychiatric Physicians" and calling the Hyatt Reservations Department at 512/477-1234 or toll free 1/800-233-1234. Discounted room rates are only available if reservations are made BEFORE October 13.

Discounted meeting registration fees are available to individuals who register BEFORE October 24. Mail or FAX your registration form and payment using your VISA or MasterCard to TSPP, 401 West 15th Street, Suite #675, Austin, Texas 78701 or if paying by credit card, FAX your registration form to 512/478-5223.

Cancellation policy: In the event of cancellation, a full refund will be made if WRIT-TEN notice is received in the TSPP office by October 24, 2005, less a 25% handling charge. NO REFUNDS will be given after October 24, 2005.

#### **SOCIAL ACTIVITIES**

The weekend's activities kick off with a complimentary wine and cheese reception with exhibitors for convention registrants and their spouse/guest. Following the reception, the TSPP Annual Awards Banquet will be held honoring the 2005 TSPP Award Recipients in recognition of their outstanding contributions to Psychiatry.

TEXAS SOCIETY	OF PSYCHIATRIC	PHYSICIANS
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#### 2005 ANNUAL CONVENTION & SCIENTIFIC PROGRAM

November 5-6, 2005 • Hyatt Regency Austin Hotel, Austin, Texas

Please complete this form and return it with your check, money order or credit card information for your registration and event fees to the Texas Society of Psychiatric Physicians, 401 West 15th Street, Suite #675, Austin, Texas 78701 by October 24 to receive the discounted registration fee. Registration forms and payments by credit card may be FAXED to TSPP at 512/478-5223.

	R	EGIS1	RA	TIC	) N FEES		
					priate enrollment category listed belower of individuals registered per event.	Please note the	enrollme
NUMBER A	ATTENDING EVENT (IF	DISCOUNTED REGISTRATION postmarked before 10/24)	AFTER 10/24	NUMBI	ER ATTENDING EVENT (IF	DISCOUNTED REGISTRATION postmarked before 10/24)	AFTER 10/24
TSPP/TEX	AS ACADEMY OF PSYCHIATRY MEMB	ER LUNCHEON		SCIEN	TIFIC PROGRAM - Saturday and Sunday		
# TS	PP/Texas Academy of Psychiatry			#	TSPP/Texas Academy of Psychiatry Member	\$190	\$235
Me	ember Luncheon - Friday	\$15	\$20	#	TSPP/Texas Academy of Psychiatry MIT/		
WELCOMI	E RECEPTION - Friday Evening				Medical Student	\$ 25	\$ 35
# NO	OT Registered for Scientific Program	\$40	\$50	#	Non-Member	\$235	\$290
	gistered for Scientific Program	No Chg	No Chg	#	Non-Member MIT/Medical Student	\$35	\$50
	PP Members/Texas Academy of Psychiatr	O	No Gilg	#	Allied Health Professional	\$ 105	\$130
	embers/Non-Members/Spouse/Guest	'		#	Spouse	\$ 95	\$120
AWARDS I	BANQUET – Friday Evening			#	Advocacy Organization Leadership	\$ 35	\$50
	• •	<b>\$25</b>	425	ANNU	AL BUSINESS LUNCHEON		
# AW	vards Presentations/Banquet	\$25	\$35	#	Annual Business Luncheon – Saturday	\$15	\$20

# Vegetarian Plate Requested

\* No add'l charge if requested
prior to 10/24

\*\* After 10/24 & On-site add add'l
\$5.00 for each Luncheon/Banquet Fee



If you require any special assistance to fully participate in this conference, please contact TSPP at (512) 478-0605.

TOTAL REGISTRATION FEE ENCLOSED \$

N D	\$

E-MAIL

PHONE

**METHOD OF PAYMENT -** Make checks payable to "Texas Society of Psychiatric Physicians"

Method of Payment

NAME

ADDRESS

☐ Check ☐ VISA ☐ MasterCard Credit Card #	Exp. Date
Name of Cardholder (as it appears on card)	-
Signature	_
Credit Card Billing Address	

CANCELLATION POLICY: In the event of cancellation, a full refund will be made if written notice is received in the TSPP office by October 24, 2005, less a 25% handling charge. No refunds will be given after October 24, 2005.

Return to: TSPP • 401 West 15th Street, Suite #675 • Austin, TX 78701 • (512) 478-0605 • FAX (512) 478-5223

## Mental Illness Awareness Week - 2005

Ianning should be underway in each TSPP Chapter for Mental Illness
Awareness Week 2005, the first week in
October. The purpose of MIAW is to increase the public's understanding of mental illnesses and psychiatric treatments. MIAW provides an annual opportunity to address three primary goals: 1) to encourage psychiatrists to collaborate with mental health advocacy organizations in the planning and implementation of MIAW activities; 2) to produce a variety of educational outreach

programs to reach as broad an audience as possible; and 3) to involve community leaders, policymakers, educators, clergy, the media etc. in delivering positive and informative messages about psychiatric illnesses.

Again this year, the Texas Foundation for Psychiatric Education and Research will provide grants to TSPP Chapters to help underwrite the expenses of MIAW activities. Each Chapter President will receive information about funds available for each Chapter as well as grant application forms.

To apply for these MIAW grants, Chapter Presidents should submit the Chapter's grant request to the Foundation prior to August 1. A Foundation Grants Review Committee will evaluate grant requests and will forward funding recommendations to the Foundation's Executive Committee for final approval. An important consideration in determining funding amounts will be the level of participation by psychiatrists in MIAW activities. Funds will be distributed to Chapter Presidents by September 15. As

a condition of accepting a grant from the Foundation, a Chapter receiving a grant is expected to submit a brief written report about its MIAW activities to the Foundation by November 1.

Mental Illness Awareness Week is an excellent opportunity to educate the public about mental illnesses and to foster working relations with patient advocacy groups in each community. TSPP and the Foundation encourages all Chapters to participate this year.

If you have not yet made your 2005 contribution to the Texas Foundation for Psychiatric Education and Research, please consider sending your tax deductible donation to the Foundation today!

# TEXAS FOUNDATION FOR PSYCHIATRIC EDUCATION AND RESEARCH

I am pleased to support the Foundation with a contribution of:						
□ \$50	□ \$100	□ \$250	□ \$500	□ \$1000	□ \$	
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Please make your check payable to "Texas Foundation for Psychiatric Education and Research"  401 West 15th Street, Suite 675, Austin, Texas 78701.  Thank you for your support! Your contribution is tax deductible to the full extent of the law.						

#### **Welcome New Members**

#### TSPP NEW MEMBERS

The following membership applications have been approved by the TSPP Executive Committee and have been transmitted to the APA.

Member in Training
Ali, Farida Y., MD
Ballard, Rachel R., MD
Bhargava, Sharlaw, MD
Brasier, Cynthia, MD
Chaudhry, Asif, MD
Flores, Virginia, MD
Gazarov, Aleksandr, MD
Guchereau, Michelle, MD

Judd, Kathryn, DO

McClam, Michael, MD Ortiz, Waleska C., MD Xia, Guohua, MD Ybarra, Christie A., MD

Member in Training to General Member Al Jurdi, Rayan, MD Ballard, Tiffany E., MD Brooks, Karen M., MD Karakoc, Tayfun, MD Matorin, Anu, MD Moukaddam, Nidal, MD

General Member Deuter, Melissa, MD Kassaw, Kristin, MD Schneider, Laurie, MD Stanfield, Peter, MD Wolski, Irene, MD Transfer from Other District Branches

Cruz, Yvette M., MD Istafanous, Ihab M., MD Johnson, Douglas, MD Kim, Bernard, MD Light, Stacy, MD Mehta, Sejal, MD Ruiz, Rafael, MD Starling, Kelley, MD

# You have just been subpoenaed. Do you know how to respond?



If you have your malpractice insurance through The Psychiatrists' Program you can rest assured. With a simple toll-free call, a risk manager can assist you with the immediate steps you need to take to protect your practice.

As a Program participant, you can call the **Risk Management Consultation Service (RMCS)** to obtain advice and guidance on risk management issues encountered in psychiatric practice. Staffed by experienced professionals with both legal and clinical backgrounds, the RMCS can help prevent potential professional liability incidents and lawsuits.

If you are not currently insured with The Program, we invite you to learn more about the many psychiatric-specific benefits of participation. Call today to receive more information and a complimentary copy of "Six Things You Can Do Now to Avoid Being Successfully Sued Later."

## THE PSYCHIATRISTS' PROGRAM

The APA-endorsed Psychiatrists' Professional Liability Insurance Program

Call: 1-800-245-3333, ext. 389 ~ E-mail: TheProgram@prms.com Visit: www.psychprogram.com

Managed by Professional Risk Management Services, Inc (In California, d/b/a Cal-Psych Insurance Agency, Inc.)



#### CALL FOR ENTRIES

# 2005

#### TEXAS SOCIETY OF PSYCHIATRIC PHYSICIANS

#### RESIDENT PAPER COMPETITION

Papers are now being accepted for the 2005 Residents' Paper Competition! Entries must be an original work produced by a resident member of TSPP while in residency training. The paper may be a piece of original research, literature review or discussion on a topic of interest to psychiatrists and should be 10-12 typewritten, double-spaced pages (excluding references). In the case of multiple author papers, the resident must be the one who has done the bulk of the research and writing. A statement to this effect must accompany the paper from the co-authors.

The winner will be announced in advance, and the paper presented at the November 5-6, 2005 TSPP Annual Scientific Program at the Hyatt Regency Hotel in Austin, Texas. All papers entered in the competition will be recognized at the meeting. The winner will receive a certificate presented in recognition of the presentation, as well as a \$250 honorarium and waiver of the scientific program registration fee and one night's hotel accommodation at the host hotel. Runners-up will be invited to present their papers as posters, the poster session to be held Friday, Saturday and Sunday, November 4-6 during the hours of the welcome reception and scientific program. Residents submitting papers will be notified of the judges' decision no later than September 30.

The 2005 Scientific Program, will address the following:

- Ethical Challenges in Assessing Patients' Decision-Making Capacity
- Update on Childhood Major Depression
- Psychiatric Medications and Pregnancy
- Dr. Parkinson's Omission: the Clinical Faces of Lewy Body Dementia

## SEND TWO COPIES OF YOUR MANUSCRIPT TO:

Texas Society of Psychiatric Physicians 401 West 15th Street, Suite 675 Austin, Texas 78701

DEADLINE FOR SUBMISSION OF PAPERS IS AUGUST 1, 2005

# **Texas Senate Recognizes TSPP**

On May 18, 2005, the Texas Senate adopted Senate Resolution 940 recognizing the Texas Society of Psychiatric Physicians, as follows:

WHEREAS, The Texas Society of Psychiatric Physicians has been the professional organization in Texas representing psychiatry since 1956 and will celebrate its 50th Anniversary in 2006; and

WHEREAS, The Texas Society of Psychiatric Physicians is recognized for its role in defining quality psychiatric care for patients in Texas in all practice settings, including both the private and public sectors; and

WHEREAS, The Texas Society of Psychiatric Physicians has encouraged and supported the active involvement of patient and mental health advocacy organizations in the public policy arena through the establishment and nurturing of the Mental Illness Awareness Coalition; and



Receiving the Resolution on the floor of the Senate were John Bush, Executive Director, Gary Etter, MD, TSPP President, and Clay Sawyer, MD, TSPP Immediate Past President.

WHEREAS, The Texas Society of Psychiatric Physicians has taken a leadership role in educating policymakers and the general public about mental illnesses and psychiatric treatments; and

WHEREAS, The Texas Society of Psychiatric Physicians has been since 1986 the first and only medical specialty society in Texas accredited for continuing medical education by the Texas Medical Association; and

WHEREAS, The Texas Society of Psychiatric Physicians is recognized for its leadership role in providing quality continuing medical education for its members and other physicians in Texas; and

WHEREAS, The Texas Society of Psychiatric Physicians has consistently advocated for the interests of patients and the eradication of discrimination and stigma against persons with psychiatric illnesses; and

WHEREAS, The Texas Society of Psychiatric Physicians has had a long and effective participation in the legislative process and been proactive in advancing quality medical and psychiatric care for the citizens of Texas based on the latest advances in science; and

WHEREAS, The Texas Society of Psychiatric Physicians helped in the establishment of the Legislative Mental Health Awareness Group, a group of legislators with an interest in better understanding mental illness and its treatment; and

WHEREAS, The Texas Society of Psychiatric Physicians is recognized for its role in encouraging the establishment of the Federation of Texas Psychiatry, an umbrella organization that will bring together medical organizations in Texas representing some 50,000 physicians to form a united voice advocating for patients and quality psychiatric care; now, therefore, be it

RESOLVED, the Senate of the State of Texas, 79th Legislature, commends the Texas Society of Psychiatric Physicians for bringing together many diverse groups of physicians, patients and mental health advocacy organizations in the service of the mental health of Texans of all walks of life; and be it further

RESOLVED, That a copy of this Resolution be prepared in honor of the Texas Society of Psychiatric Physicians' 50 years of service to Texas and as an expression of esteem from the Texas Senate.

#### **CALENDAR OF MEETINGS**

#### JULY

#### 22-24 TSCAP Summer Meeting

"The Adolescent Brain: Developmental, Psychotherapeutic and Pharmacologic Issues" Lakeway Inn Conference Resort on Lake Travis Austin, TX

#### **O**CTOBER

#### 20-23 6th Annual Medical Fiction Writing for Physicians

Sea Crest Oceanfront Resort and Conference Center Cap Cod, Massacheusetts 508/457-1111; SBabitsky@aol.com

#### **NOVEMBER**

#### 4-6 TSPP Annual Convention and Scientific Program

"The Dynamic Spectrum of Clinical Psychiatry" Hyatt Regency Austin Hotel Austin, TX

#### 4 TSPP Committee Meetings

Member Luncheon Welcome Reception with Exhibitors Annual Awards Banquet

#### 5 TSPP Scientific Program

Annual Business Meetings Executive Council Meeting

6 TSPP Scientific Program

#### **FEDERATION OF TEXAS PSYCHIATRY**

The Federation was established on July 1, 2004 with the following purposes:

A. to promote the common professional interests of psychiatrists;

- B. to facilitate the coordination of and work in concert with state professional psychiatric associations and state professional subspecialty psychiatric associations, to unify programs that advance public and professional education and advocacy for psychiatry and persons with psychiatric illnesses;
- C. to provide centralized services to state professional psychiatric associations and state professional subspecialty psychiatric associations;
- D. to make psychiatric knowledge available to other practitioners of medicine, to scientists, and to the public; and,
- E. to promote the best interests of patients and those actually or potentially making use of mental health services.

The TEXAS PSYCHIATRIST is published 5 times a year in February, April, June, August, and October. Members of Federation member organizations are encouraged to submit articles for possible publication. Deadline for submitting copy to the Federation Executive Office is the first day of the publication month. Copy must be edited, acceptable for publication.

Display advertising is available and publication is determined on a case by case basis by the Editorial Board. The Editorial Board reserves the sole right to accept or reject any submitted advertising copy.

#### **EDITORIAL BOARD**

Joseph Castiglioni, Jr., MD Edward L. Reilly, MD

#### MANAGING EDITORS

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