lexus Psychiatrist



Join Your Texas Colleagues at the First-Ever TSPP/TAP Virtual CME Activity

May 16, 2:15-7:55 pm (Central Time)

Melissa Gail Inga Eshelman, MD, DFAPA, President, Texas Society of Psychiatric Physicians

hope you, your family and friends are staying safe and you are managing the challenges that have been dealt by the COVID-19 pandemic.

I am writing to provide you with an update regarding the May 16, 2020 Texas Society of Psychiatric Physicians / Texas Academy of Psychiatry Joint Providership CME Program "Hot Topics in Clinical Practice: Updates in Psychiatric Care".

After careful consideration of the evolving COVID-19 situation in Texas, with review of all of the information reported from local and state health officials, in addition to local, state and federal orders and restrictions, the TSPP Executive Committee has determined the live meeting should be conducted in a virtual setting to ensure the health and safety of all partic-

The MAY 16 virtual program schedule, and speaker presentation times, 2:15 PM-7:55 PM will be presented in accordance with the same sequence as announced in the live meeting.

Special Thank You! TSPP is most appreciative to the Westin Austin at the Domain Hotel, its' management and staff, who went above and beyond in supporting our organizations and worked collaboratively with TSPP and TAP to allow our organizations to cancel the Sales Agreement contract and avoid any financial liability or assessments. We will explore a new contract with Westin Austin at the Domain in 2021 when we can all be assured of the health and safety of all attendees at a live activity again. In addition, Professional Risk Management Services is also due a very special thank you from the membership for their demonstrated support of our organization and agreement to transfer their prepaid Exhibitor Display payment towards the sponsorship page being developed on the Federation of



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TSPP/TAP Virtual CME Speakers



Adriane dela Cruz, MD Medication Assisted Therapy for Opioid Use Disorders



John M. Oldham, MD, MS Diagnosis and Treatment of Borderline Personality Disorder



Stephen R. Saklad, Pharm.D., BCPP Management of the Side Effects of Psychotropic Medications



Marisa Toups, MD Nutritional Psychiatry - What Psychiatrists Need to Know & What They Should Tell Their Patients



R. Lowell McRoberts, III, MD Somatoform Disorders: Prevalence, Diagnosis and Treatment

Texas Psychiatry's website at www.txpsych.org. Click on the links next to the TSPP Program to be taken to the virtual program and registration form.

You are all on the front lines in the fight to control the spread of the virus and treat infected patients so we want to ensure that our organizations contribute to those protective measures to allow you to continue

We hope in spite of the COVID-19 pandemic that you will plan to participate to allow all of us in Texas Psychiatry to stay connected. The registration fee has been dis-



Melissa Gail Inga Eshelman, MD, DFAPA

counted to allow for as many psychiatrists in Texas to participate. If you already mailed your registration payment for the live meeting and have questions about how to register for the Virtual CME meeting please email the TSPP office at tsppofc@aol.com

Your participation is even more crucial now, more than ever before, as we respond to your immediate needs and address the CME gaps that were identified when arranging this CME program for the membership.

We are sincerely appreciative to you for your membership, and for your support of TSPP. Please plan to join this virtual CME program from the safety of your own designated environment. Thank you!

Texas Society of Psychiatric Physicians and Texas Academy of Psychiatry "Hot Topics in Clinical Practice: Updates in Psychiatric Care"

SCIENTIFIC PROGRAM SCHEDULE (5 Hours Category 1 Credit)

2:15-2:25 pm

Log onto ZOOM To be admitted to the CME Program... starts prompty at 2:30 pm **Welcome and Introductions**

2:30 pm

2:35 pm - 3:35 pm

"Nutritional Psychiatry - What Psychiatrists Need to Know and What They Should Tell Their Patients" - Marisa S. Toups, MD

Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants should be able to:

- Identify dietary and nutritional risks in patients' current history.
- Counsel patients on effective nutritional strategies, including risk benefit considerations, that may affect their psychiatric illness and overall health.
- Make appropriate referrals to qualified nutritionists when indicated. Discuss mood disorders and current treatment recommendations.
- Identify latest evidence (or lack thereof) for the use of supplements in dementia, autism spectrum disorders and other disorders where nutrition and supplements are widely written and discussed.

3:35 pm - 4:35 pm "Medication Assisted Therapy for Opioid Use Disorders" - Adriane dela Cruz, MD, PhD

Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants

- Cite medication assisted therapy for treatment of opioid use disorder. Identify and discuss Medication for Addiction Treatment (MAT)

4:35 pm - 4:45 pm Break

4:45 pm - 5:45 pm "Somatoform Disorders: Prevalence, Diagnosis and Treatment" -R. Lowell McRoberts, III, MD

Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants

Apply sensitivity and identify specificity of somatoform diagnoses.

- · Identify and apply co-management of psychiatric and medical symptoms by psychiatry and primary care practitioners.
- Recite and effectively combine pharmacotherapy, psychotherapy, medical monitoring to improve behavioral outcomes.

5:45 pm - 6:45 pm "Management of the Side Effects of Psychotropic Medications" - Stephen R. Saklad, Pharm.D., BCPP

Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants

- List the most common problematic side effects of psychotropic medications in your practice.
- Explain evidence-based ways to manage problematic side effects of psychotropic medications.
- Develop a strategy to screen for side effects in your routine practice.

6:45 pm - 6:55pm Break

6:55 pm - 7:55 pm

"Diagnosis and Treatment of Borderline Personality Disorder" - John M. Oldham, MD, MS

Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants should be able to:

- Identify and accurately diagnose Borderline Personality Disorder (BPD)
- Prescribe effective treatment for this disorder.
- Make appropriate referrals for additional treatment when necessary.
- Avoid prescription of medications that have a poor risk/benefit ratio for

7:55 pm - 8:05 pm Closing Remarks



Virtual CME

Hot Topics in Clinical Practice: Updates in Psychiatric Care To Register: Complete the Registration Form on page 2 or

Register online at http://www.txpsych.org



Melissa Gail Inga Eshelman, MD, DFAPA, President, Texas Society of Psychiatric Physicians

As I write my final column, I am struck with all the changes that have occurred since March. There is a current Executive Order by Governor Abbott that mandates Texans may leave their homes only where necessary to provide or obtain essential services and to minimize social gatherings and minimize in-person contact. Some major cities and counties in Texas have shelter in-place orders. The COVID-19 pandemic has changed all our lives.

I am grateful for our psychiatrists in Texas and how they have adapted to continue to provide care to individuals with mental health issues. This includes the emergency departments psychiatrists who continue to provide care to individuals presenting in psychiatric crises. Our psychiatrists who must go to hospital or residential care settings to care for those hospitalized or admitted to residential care settings now must take extra precautions. I imagine many, but perhaps not all, psychiatrists who work in partial hospital and intensive outpatient program levels of care have had to change the delivery of services to remote options. And to all those who provide outpatient services, the majority have had to make a change from in-person appointments to phone or telepsychiatry.

In addition to changes in how we provide care to patients, many of our psychiatrists have had to manage how this pandemic has affected their personal lives. This includes providing extra support to elderly family members or dealing with being unable to visit an elderly family member directly because they are in nursing homes (and needing to try remote options, when available). And the unexpected changes many of had to make with our children! School aged children missing going to school and extracurricular activities and spending time with friends. Parents now having to assist with school at home, while managing your own work responsibilities. College kids who had to return home and take on-line classes are missing their peers and the independence they experienced when living away from home. Many have or will miss celebrating special family events, like weddings and gradations. My heart aches for those who have lost a family member or friend to COVID-19. I have only mentioned some of

the changes.

TSPP has resources. On the TSPP website we have a COVID-19 Update – Federation of Texas Psychiatry page. This includes Resources for patients; Crisis numbers; CDC and DSHS Materials and Communication Toolkits; APA and AACAP resources; Malpractice insurance info; information on Licensure and Telehealth waivers across the US; Federal Government updates and Texas updates. Recently added is "Call To Mind", which has resources for dealing with COVID-19. We hope this information is helpful for you, your patients and family members.

This pandemic has led to changes and uncertainty about the future; this also includes our Spring Meeting scheduled in May. Please know behind the scenes we have been working diligently so we are able to continue to provide the outstanding continuing medical education program to the members in a virtual format. By the time you read this column, you will have received announcement of the Virtual MAY 16 CME Program as was originally announced as a live meeting. The program



Melissa Gail Inga Eshelman, MD, DFAPA

and registration form is included in this Newsletter and available online at www.txpsych.org Please plan to register and participate!

My term comes to an end in May and I will pass the gavel to Tim Wolff, MD. Thank you to all our members for your work and support of TSPP. I would like to extend my heartfelt appreciation to Debbie Giarratano for all she does for TSPP. It has been an honor to contribute to TSPP's mission of developing the highest quality of comprehensive psychiatric care for our patients, families and communities.

Stay well and safe.

CME PROGRAM GOAL / TARGET AUDIENCE

This live activity has been designed in a lecture format with case examples followed by an interactive audience question and answer period to provide its' primary target audience of Psychiatrists, as well as other specialties of medicine, with the most up-to-date, evidence-based data that can be translated into clinical practice.

The information and data presented will address the professional practice gaps of the learners and advance the physician's competence and improve their knowledge about the complex contributing factors in this patient population and introduce additional resources and new strategies to improve outcomes so that they may develop strategies to apply the knowledge, skills and judgement of the information presented in the educational activity into their practice.

IDENTIFIED PRACTICE GAPS / NEEDS ASSESSMENT

TSPP identified educational needs and professional practice gaps from members expressed needs and in medical literature and incorporated it into the CME activity to address the relevant educational needs concerning competence that underlie the professional practice gaps of the participants.

Many psychiatrists have insufficient knowledge and competence in counseling their patients about effective nutritional strategies, including riskbenefit considerations, that may affect their psychiatric illness and overall health.

Disorders presenting as physical symptoms but having no known physical cause present clinical burdens for primary care physicians and require mental health treatment for effective management. Diagnostic and treatment methods to address conversion disorder, somatic symptoms disorder, illness, anxiety disorder are needed for improved recognition and clinical outcome.

Side effect of psychiatric medications is an everyday occurrence in the psychiatric practice. It contributes to non-compliance of treatment recommendation, medical misadventure, morbidity, missed opportunities in achieving the treatment goals.

Not enough waivered physicians to prescribe Suboxone. Psychiatrists often don't have training or knowledge to help their patients with OUD.

OBJECTIVES

The learning objectives for this activity have been designed to address clinician competence and are listed under each presentation.

ACCREDITATION STATEMENT

This activity has been planned and implemented in accordance with the accreditation requirements and policies of the Texas Medical Association (TMA) through the joint providership of the Texas Society of Psychiatric Physicians and the Texas Academy of Psychiatry. The Texas Society of Psychiatric Physicians is accredited by TMA to provide continuing medical education for physicians.

CREDIT STATEMENT

The Texas Society of Psychiatric Physicians designates this Live Activity for a maximum of five (5) *AMA PRA Category I Credits*™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

FACULTY AND PLANNERS DISCLOSURE POLICY

In compliance with the ACCME/TMA Standards for Commercial Support of CME, to assure balance, independence, objectivity and scientific rigor in all of its CME activities, prior to the education activity being delivered to the learners, the Texas Society of

401 West 15th Street, Suite 675, Austin, TX 78701

Psychiatric Physicians implemented a mechanism to identify and resolve personal conflicts of interest from everyone who was in a position to control the content of the education activity.

TSPP will disclose to learners the existence (or non-existence) of all relevant financial relationship(s)

that the faculty and planners did (or did not) have with any commercial interest concerned with the content of the educational presentation.

Disclosure will occur prior to the presentation through written communication in the syllabus / handout motorials



LAST NAME

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Texas Society of Psychiatric Physicians and Texas Academy of Psychiatry

VIRTUAL LIVE CME WEBINAR May 16, 2020

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Texas Society of Psychiatric Physicians

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REGISTRATION FORM

http://www.txpsych.org

When your registration payment has been processed, you will receive an email invite at the email address provided on your registration form with a link to join the meeting, the unique Meeting ID # and information for joining the meeting on Saturday, May 16. The program will begin promptly at 2:30 pm. Thank you for registering!

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PARTICIPATION POLICY — The Texas Society of Psychiatric Physicians' policy is to promote an environment of diverse opinions its members hold on the issues with which the Society and the psychiatric profession are confround in a manner appropriate for health care professionals. This includes respect for the intellectual property of other behavior towards others. Individuals participating in TSPP sponsored meetings agree to listen respectfully to all views presented, and to exhibit the professionalism and collegiality expected of psychiatrists. If an individual breached, he or she shall contact TSPP staff to help with the situation. TSPP reserves the right to remove meeting for this meeting, you agree to abide by the Participation Policy as described above.	onted. All individuals participating in the (live or vir rs, proper display and use of meeting badges, and i I views presented, be courteous to others regardles believes that these rules have been violated or acc g access rights of any individual violating this policy	tual) meetings agree to conduct themselves the avoidance of aggressive or inappropriate s of whether you agree or disagree with the eptable social decorum has otherwise been	
REGISTRATION FE	E SCHEDULE		
TSPP / ACADEMY / TSCAP Member	\$90.00		
RESIDENT-FELLOW MEMBER (IN TRAINING) TSPP/ ACADEMY / TSCAP MEMBER	\$10.00		
RESIDENT FEELOW MEMBER (IN TRAINING) 1317 ACADEMY 13CAF MEMBER REM MEMBER WHOSE TRAINING PROGRAM DIRECTOR HAS REGISTERED	NO CHARGE		
List Training Program Director's Name:			
MEDICAL STUDENT MEMBER APA	\$10.00		
NON-MEMBER PHYSICIAN	\$115.00		
NON-MEMBER RESIDENT-FELLOW PHYSICIAN OR MEDICAL STUDENT	\$20.00		
□ ALLIED HEALTH PROFESSIONAL	\$75.00		
MEETING SYLLABUS ORDER			
☐ Meeting Syllabus in Color	\$155.00		
☐ Meeting Syllabus in Color ☐ Meeting Syllabus in Black & White	\$125.00		
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Cancellation Policy: No REFUNDS given after May 1.

ADDRESS WHERE YOU RECEIVE YOUR CREDIT CARD STATEMENT (include address, city, state, zip):



Navigating the COVID Political Landscape

Eric Woomer, Federation of Texas Psychiatry Public Policy Consultant

ddressing the global Coronavirus pandemic is the most pressing issue before the nation's governmental bodies, and the State of Texas is no exception.

Despite the stay-at-home orders, the business of Texas government continues. Here is a snapshot of issues facing Texas as we manage the international health crisis:

As of April 30, the number of COVID-19 confirmed cases globally have exceeded three million. In the United States, the total number of cases now exceeds one million, with more than sixty thousand deaths. In Texas, we have faced more than 27,000 confirmed cases and more than 730 deaths. Grim numbers, all. However, the University of Texas recently released new modeling that forecasts when states across the U.S. are likely to see the peak in first-wave COVID-19 deaths. The report suggests that there is a 64% probability Texas has already seen its peak in COVID-19 deaths and a 99% probability that the U.S. has already seen its peak as well.

On April 27th, Gov. Greg Abbott announced a phased-in approach to reopen the Texas economy. In Phase One, beginning May 1, restaurants, retail stores, malls, movie theaters, museums and libraries in counties with five or fewer COVID-19 cases can reopen at 50% capacity. For those in counties with more than five cases, these same businesses can reopen at 25% capacity. Additionally, all licensed health care workers can return to work with any additional precautions to be established by their regulatory agencies.

Also starting May 1, hospitals are required to reserve at least 15% capacity for COVID-19 treatment. Abbott will consider data from that two-week period to determine whether more businesses can reopen and if the opened businesses can increase capacity to 50% during Phase Two. The Governor also announced a new testing and contact tracing program to help iden-

tify and limit virus spread.

Abbott's office also produced the "Governor's Report to Re-Open Texas," which provides more specific guidance for people older than 65 and mitigation plans for nursing homes. In addition, the report speaks to state actions to increase contact tracing and testing. The booklet outlines a checklist for businesses and consumers to follow during the phased-in re-opening.

Meanwhile, Lt. Gov. Dan Patrick announced that the Senate will convene six new workgroups to discuss COVID-19 related challenges the state will face in the 2021 legislative session. The committees will discuss these challenges and options facing the state, but not necessarily develop legislation. The workgroup on Health, Hospitals, and COVID-19 Issues will be led by Sen. Lois Kolkhorst and includes Sens. Dawn Buckingham M.D., Donna Campbell M.D., Charles Schwertner, M.D. Other workgroups and chairs include: Economic Impact & Budgeting led by Sen. Jane Nelson; Senate Pandemic Preparedness led by Sen. Bryan Hughes; Public Schools & Higher Ed led by Sen. Larry Taylor; Jobs & Re-Opening the Economy led by Sen. Kelly Hancock; and, Food Supply Chain, Food Banks & Agriculture led by Sen. Charles

Comptroller Glen Hegar has been giving periodic financial updates during the crisis, which portend a fiscally challenging 2021 legislative session. There have been published rumors about the state imposing current-biennium budget reductions of five to twenty percent, depending on the source. The Governor and legislative leadership have debunked these reports from time to time, but most watchers expect significant spending reductions. State agencies have not received any direction from state leadership as to spending cuts, but the Comptroller said that agencies should be looking at their budgets now, and not wait-

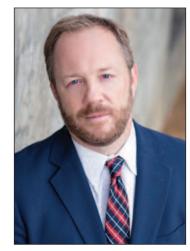
ing until later to react.

Comptroller Hegar also suggested there is not a need for special session in the near term, as the state can use the Economic Stabilization Fund (ESF) for cash flow purposes which the state has done in the past. The ESF was projected to have a balance at the end of the current fiscal year of \$9.3 billion, but it is projected to decline to \$8.5 billion. Nonetheless, Hegar feels confident that the state can meets its obligations and provide the necessary cash flow despite revenues falling and demand increasing. There are a number of tools in the state's fiscal toolbox, including agency reductions in expenditures, infusion of federal dollars, moving dollars around within the budget

The increased Federal Medical
Assistance Percentages (FMAP) for
Medicaid is estimated to provide Texas with
approximately \$1 billion in additional federal funds, which will help offset expenses
and allow the Legislature and the state to
free up other dollars for spending.

However, the Comptroller noted that the significant decline in oil and gas severance tax revenue is of major concern, as are declines and delays in collections of sales taxes, hotel occupancy taxes, and other revenues. The state is in an unprecedented time, and there is no other event that compares economically, where Texas went from adding 50,000 jobs in one month, to seeing a rise in unemployment claim filings of over 275,000 in less than a week.

To survive the crisis, health care providers are increasingly turning to telemedicine, but a number of regulatory impediments initially prevented a smooth transition. To address this problem, Gov. Abbott directed the Texas Department of Insurance (TDI) to issue emergency rules relating to telemedicine provided through state-regulated insurance plans. Contracted or preferred physicians will be eligible for



Eric Woomer

payment from TDI-regulated insurance plans for medical visits they conduct over the phone instead of in person at the same rate they would receive for in-person visits.

Additionally, effective immediately, the U.S. Health and Human Services (HHS) Office for Civil Rights has announced it will not penalize physicians for noncompliance with HIPAA when they serve patients in good faith through communications technologies such as FaceTime or Skype. The Centers for Medicare & Medicaid Services (CMS) has also temporarily broadened telehealth access to Medicare patients, permitting office visits furnished via telehealth in all areas of the country (not just rural areas) and in any setting including in a patient's home.

The aging state hospital facilities are creating a challenge for social distancing among patients, physicians, and staff. In an effort to create space to isolate patients, state hospitals are no longer operating at full capacity. HHSC is working with local mental health authorities to prioritize emergency civil admissions where there is no adequate community inpatient resource available with the next priority being afforded to patients from the maximumsecurity units in Vernon and Rusk, to transfer to other state hospitals when the patients are determined to be not manifestly dangerous. The state will continue to admit local provider transfers and forensic patients as space and staffing allow.

See Navigating page 3

CONGRATULATIONS TSPP New Officers for 2020-21

ollowing the conclusion of the May 16 TSPP/TAP Virtual Spring Meeting, the Texas Society of Psychiatric Physicians new officers for 2020-21 will assume office.

Thank you Drs. Wolff, Arambula, Wagner and Eshelman for your numerous contributions over the years of behalf of Psychiatry and for agreeing to provide exemplary leadership and service on behalf of your colleagues in 2020-21.

And, a very special thanks and apprecia-

tion to outgoing President, Dr. Melissa Gail Inga Eshelman, for her outstanding leadership and guidance throughout her Presidential year and especially during the current, unprecedented journey we are all on, navigating COVID-19 and the devastating obstacles it has created that have directly affected all of our lives.

Resources and links to address COVID-19 have been compiled from all of the most relevant sources to assist you in your practices and personal lives, and is available online at www.txpsych.org
Together we will remain strong and we thank each and every member that have given unselfishly of their time and energy to ensure the health and safety of others. We are extremely proud of our membership and TSPP remains committed to representing your interests and needs, today, tomorrow and well into the future.



President
Timothy K Wolff,
MD, DLFAPA



President-Elect Michael R. Arambula, MD, Pharm.D, DLFAPA



Secretary-Treasurer Karen Dineen Wagner, MD, PhD, DLFAPA



Immediate Past President Melissa Gail Inga Eshelman, MD, DFAPA

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Yes, I want to make a donation!

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Committee Preferences 2020-21

HANK YOU for your continued membership and strengthening the voice of Psychiatry in Texas! TSPP's mission is to develop the highest quality of comprehensive psychiatric care for patients, families, and communities and your individual membership helps collectively accomplish that goal by enabling TSPP to continue to provide quality CME programs and a strong legislative voice for Psychiatry.

Your personal involvement in TSPP's activities also helps to shape the future of Psychiatry. With this in mind, TSPP invites you to serve on committees this year by selecting from the list in the preference form, the committees you have an interest in (Please try to limit your selection to one Committee per Council listing to avoid potential meeting conflicts). Participation in committees also provides an opportunity to informally network with your colleagues from around the State and share issues and concerns about your practice, patient care, legislative matters and medical education.

To make your selection and submit your

committee preferences, complete Name/ Address/Email and place an "X" In the appropriate committee columns and email to tsppofc@aol.com, fax to 512-478-5223 or mail it to to TSPP, 401 West 15th St., Ste 675, Austin, Texas 78701. Your selections must be received by TSPP by July 31. Your preferences will be considered by TSPP President Timothy Wolff, MD when he begins making appointments. Appointments are generally for 3 years. Confirmation of committee appointments will be mailed in August. Information about each of the committee's charges is listed below the committee preference form.

Committees will meet virtually in November 2020 and most likely, May 2021, until all of the COVID-19 health and safety issues have been resolved. If you have any questions please do not hesitate to contact our office via email tsppofc@aol.com or leave a telephone message at 512-478-0605 for a return call.

> **Debbie Giarratano Executive Director**

COMMITTEE CHARGES 2020-21

COUNCIL ON ADVOCACY

GOVERNMENT AFFAIRS: To monitor present and proposed legislation and regulation at all government levels that could affect services to psychiatric patients; to attempt to ensure such legislation is in conformity with the principles of scientific care; to propose needed legislation or regulation, in liaison with other interested groups when appropriate, that would benefit psychiatric patients

and the psychiatric profession in its efforts to treat patients effectively; and, to monitor court developments affecting patients and members.

COUNCIL ON EDUCATION CONTINUING MEDICAL EDUCATION:

To develop the Scientific Program for the Texas Society of Psychiatric Physicians' Annual Meeting in accordance with the Essentials as outlined in the Texas Medical Association's CME Guidelines, after receiving approval both from the Executive Council and the Finance Committee for particular plans; and, to assist the President-Elect in the development of the Scientific Program for the Texas Medical Association Section on Psychiatry.

PROFESSIONAL PRACTICE MANAGE-**MENT:** To review clinical practice issues affecting members in any practice setting (eg regulations, reimbursement, technology, office procedure, etc) and propose educational programs and policies to improve the delivery of care to patients and to enhance the practice of psychiatry. As needed, review and update existing practice guidelines and develop new guidelines for the practice of psychiatry.

RESIDENT-FELLOW MEMBER SEC-**TION:** To review the needs and concerns of members-in-training as seen by the residents to facilitate more resident involvement with appropriate TSPP Committees; and, to provide a forum for members-intraining for collegial sharing of mutual concerns and ideas.

COUNCIL ON SERVICE

ACADEMIC PSYCHIATRY: To provide a forum for psychiatrists employed by academic centers to network and to share information of mutual interest and concern about their academic settings.

CHILDREN & ADOLESCENTS: To monitor developments in the field of child and adolescent psychiatry, in both the private and public sectors, and to inform the membership of issues and policies affecting the care and treatment of children and adolescents.

PUBLIC MENTAL HEALTH SERVICES: To review the effectiveness of the organiza-

tion of clinical services, and the funding for public mental health services administered and/or provided by State and local public agencies; and, to assess the authority, roles, and functions of psychiatrists in public mental health services.

legal aspects of civil, criminal, correctional and legislative issues that affect patients and the practice of psychiatry.

COUNCIL ON FELLOWSHIP

CHAPTER LEADERSHIP FORUM: To provide a forum for Chapter leaders to meet and discuss issues of mutual interest regarding Chapter operations.

COUNCIL ON LEADERSHIP

CONSTITUTION & BYLAWS: To prepare, as necessary, changes in the Constitution and Bylaws as mandated, either by vote within the Society or changes in APA structure which affect the District Branch structure as well; to review the Constitution and Bylaws and submit recommendations for possible improvement of the current document.

ETHICS: To undertake the confidential investigation of complaints of unethical behavior or practices against Texas Society of Psychiatric Physicians' members in accordance with APA procedures approved by the Assembly and the Board of Trustees.

DISTINGUISHED FELLOWSHIP: To coordinate all nominations for advance-

FORENSIC PSYCHIATRY: To review the

ment of Distinguished Fellowship in the American Psychiatric Association and

Ethics (2)

Finance

Nominating (3)

Distinguished Fellowship (2)

FINANCE: To prepare an annual operating budget, taking into account previous years' income and expenses, and requests from individual committees and other components; to review requests from members regarding dues adjustments and recommend appropriate actions to the Executive Council; to oversee and advise on investment strategies for reserve funds; to present financial statements; to make

recommendations to the Executive Council and the membership as to the financial needs of the Society; and to develop strategies to recruit and retain members.

NOMINATING: To recommend a slate of officers to the membership at the annual meeting as per Chapter VI, Section VI of the TSPP Bylaws; to screen nominations for the Distinguished Service Award, the Special Service Award, and the Psychiatric Excellence Award and other awards approved by the Executive Council, and to make recommendations in regard to these matters to the Executive Council.

ADDRESS EMAIL Current Member **COUNCILS & COMMITTEES 2020-21 COUNCIL ON ADVOCACY Government Affairs COUNCIL ON EDUCATION Continuing Medical Education** Resident-Fellow Member Section **Professional Practice Management COUNCIL ON SERVICE Academic Psychiatry** Children & Adolescents Forensic Psychiatry **Public Mental Health Services COUNCIL ON FELLOWSHIP** Chapter Leadership Forum (1) **COUNCIL ON LEADERSHIP** Constitution & Bylaws (2)

Committee Preferences 2020-21

make recommendations to the Executive Council regarding Fellowship recommendations.

(1) Chapter Officers and Representatives (2) Appointed by Chapter (3) Past Presidents

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Dear TSCAP Members

Susan Wynne, MD, President, Texas Society of Child and Adolescent Psychiatry

hope you are doing well during this challenging time, with the threat of increasing cases of Coronavirus (COVID-19) in the United States, travel and shelterin-place restrictions. I would like to update you on plans for the upcoming TSCAP Annual Meeting that is scheduled for July 17-19, 2020 in Galveston, TX at Moody Gardens Hotel.

The health and safety of our members and guests attending our meeting is of the upmost importance to our organization. We are exploring options to have the CME program presented electronically, to ensure that our members keep current and continue to meet CME requirements. We will continue to keep you informed with plans for the upcoming meeting, as well as other

relevant issues that affect the practice of Child and Adolescent Psychiatry.

For resources and current links to COVID-19 information check out the Federation of Texas Psychiatry's website www.txpsychiatry.com

And in the interim, please do not hesitate to e-mail me with your questions/ concerns at tscapofc@aol.com.



Susan Wynne, MD

"Mood Dysregulation and Evolving Modalities in the Delivery of Psychiatric Care"

SCIENTIFIC PROGRAM SCHEDULE

Saturday, July 18 (6 Hours Category I CME Credit Hours™)

8:00 - 8:30 am **Welcome & Opening Remarks**

8:30 - 10:30 am **Disruptive Mood Dysregulation Disorder**

KEYNOTE SPEAKER: James J. McGough, MD

Objectives: The learning objectives for this activity has been designed to address clinician competence. Upon conclusion of the activity participants should be able to:

Identify aggression in DMDD

- Increase knowledge of current research on DMDD
- Identify pharmacological treatment of target symptoms of DMDD
- Identify differences and similarities between Bipolar DO, ADHD and DMDD

10:30 - 10:50 am **Refreshment Break**

10:50 - 11:50 am **Mental Health Urgent Care Panel**

Phillip Balfanz, MD, MBA and Melissa Deuter, MD

Objectives: The learning objectives for this activity has been designed to address clinician competence. Upon conclusion of the activity participants should be able to:

Describe mental health urgent care model in private practice setting.

Discuss the delivery of care in the urgent care model, its' advantages and disadvantages, and identify specific issues that psychiatrists may face.

11:50 - 12:10 pm **Refreshment Break**

12:10 - 1:10 pm How to Treat Children with DMDD - Medications and Psychotherapy

Resident Case Presentation and Faculty Discussant

Sonia Popatia, MD (Resident) and Dana Bradley, MD (Faculty Discussant) Objectives: The learning objectives for this activity has been designed to address clinician competence. Upon conclusion

of the activity participants should be able to:

Accurately diagnose DMDD in Children and Adolescents

Identify known pharmacologic treatments of aggresssion associated with DMDD

Diagnose Comorbid Disorders with DMDD

1:10 - 1:30 pm **Refreshment Break**

1:30-2:30 pm **PANEL: Texas Child Mental Health Care**

Consortium and Preliminary Data/ Engagement Sarah Wakefield, MD, Melissa DeFilippis, MD, Nhung Thi-Vien Tran, MD

Objective: The learning objective for this activity has been designed to address clinician competence. Upon conclusion of

the activity participants should be able to:

- Describe the goals of the Texas Child Mental Health Care Consortium (TCMHCC)
- Discuss CPAN and how Pediatricians can access it. Describe the goals and components of TCHATT.

2:30 - 3:30 pm

University / Student Health Psychiatric Services

Melissa Eshelman, MD

Objectives: The learning objectives for this activity has been designed to address clinician competence. Upon conclusion of the activity participants should be able to:

Understand special diagnostic challenges of college student mental health treatment and limits of treatment: number

- of visits, availability of psychiatrists, psychologists, masters-level mental health practitioners.
- Identify different interventions and evidence based treatments in delivering care to college students. Discuss confidentiality issues pertaining to the interface between the university and the college student.

3:30 - 3:45 pm **Closing Remarks**

Sunday, July 19 (3 Hours Category I CME Credit Hours™)

8:45 - 9:15 am **Welcome & Opening Remarks**

9:15 - 10:15 am

Special Clinical Considerations in Treating Persons with Intellectual and Developmental Disabilities (IDD) and Dysruptive Mood Dysregulation Disorder (DMDD) with Comorbid Psychiatric Disorders in Residential T reatment Centers / Group Home Settings

Steven R. Pliszka, MD and Juan I. Campos, MD

Objectives: The learning objectives for this activity has been designed to address clinician competence. Upon conclusion of the activity participants should be able to:

- Discuss pharmacological treatments of different target symptoms. Identify differences in dosing and medication choices for persons with IDD
- Identify specific clinical challenges in these settings.
- Discuss treatments and specific clinical challenges of patients with Dysruptive Mood Dysregulation Disorder with comorbid Attention Deficit Hyperactive Disorder, Major Depressive Disorder and Bipolar Disorders.

10:15 - 10:30 am **Refreshment Break**

10:30 - 11:30 am **ETHICS: Seclusion & Restraint in Correctional Setting**

Joseph V. Penn, MD

Objectives: The learning objectives for this activity has been designed to address clinician competence. Upon conclusion of the activity participants should be able to:

Identify the clinical, legal and ethical issues related to Seclusion and Restraint.

11:30 - 12:30 pm **ETHICS: Transgender and Gender Dysphoria**

Walter J. Meyer, İII, MD

 $Objectives: The \ learning \ objectives \ for \ this \ activity \ has \ been \ designed \ to \ address \ clinician \ competence. \ Upon \ conclusion$ of the activity participants should be able to:

- Identify and improve the clinical competency in understanding ethical issues involving transgender patients.
- Identify and discuss best practices for Transgender youth/teens and hormone therapy (when/why/how to refer)
- Discuss how Transgender Youth Issues are being addressed in mental health settings.

12:30 - 12:45 pm Closing Remarks

Navigating the COVID Political Landscape

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Meanwhile, we are working with LMHAs, hospitals, and state agencies to potentially increase the number of state-contracted community beds.

The S.B. 362 Task Force that is working on increasing access to the courts for mental health-related emergency detentions has diligently continued its efforts during the COVID-19 crisis. The Task Force is presently analyzing the Law Enforcement Advanced DWI Reporting System ("LEADRS"), an existing technology that assists with obtaining warrants for blood draws in DWI cases, which could serve as a model system to develop a similar system to obtain warrants for emergency detention. LEADRS uses a series of questions in text boxes, drop menus, and check boxes to compile all information needed to complete a DWI case report which is then electronically sent to the judge. In jurisdictions where LEADRS has been implemented, the average time to get a DWI warrant with this technology is a matter of minutes.

Other issues that Task Force is reviewing include clarification regarding a judge's

refusal to sign or hear an Order of Protective Custody based on the fact that a bed is not available, and allowing mandatory blood draws for patients being admitted to state hospitals for psychoactive medication administration purposes. The Task Force's report to the Judicial Council of the Texas Supreme Court is due June 1st, and will likely lead to new judicial rules for Texas courts as well as the potential for legislation in 2021.

The Substance Abuse and Mental Health Services Administration (SAMHSA) recently awarded \$450 million in grants, including \$250 million in emergency COVID-19 funding, to expand mental health and substance use disorder treatment services through certified community behavioral health clinics. The State of Texas applied for a grant, but as of this writing, it has not received an award approval.

One of the more intriguing policy matters that the Legislature will grapple with in 2021 is whether to revert to policies and laws that were in place prior to the COVID-19 crisis, or to enact new laws consistent

with the waivers adopted during the pandemic. For instance, Gov. Abbott recently waived the requirement that advanced practice registered nurses must complete certain testing requirements before entering the workforce and practicing under direct physician supervision. Perhaps this change was critically needed to ensure adequate APRN personnel, but will the erosion of testing lead to an undereducated work-

To date, there have been no expansions of the scope of practice for APRNs or psychologists, but many other areas of law (such as telemedicine) have been liberalized during the crisis. Will today's "new normal" be the regulatory paradigm once the crisis dissipates? If so, presumably the legislature will have to enact new laws to reflect the changes implemented through waivers. What political pressure will come to bear, either to preserve the status quo or encourage a return to the old order?

Another noteworthy example of this policy conundrum is "alcohol-to-go." In March, the governor waived regulations to

allow restaurants to deliver alcohol to customers in an effort to support the hospitality industry in Texas. Such sales were not allowed before restrictions were placed on restaurants to slow the spread of COVID-19.

Via Twitter, Abbott recently suggested alcohol-to-go could remain a permanent thing after the coronavirus pandemic ends. However, the Legislature will have to approve a bill to permanently allow alcohol-to-go sales. Some lawmakers are already voicing their enthusiasm, which would have been a controversial policy change in any other session. Will the public demand a continuation of alcoholto-go? It remains to be seen, but we are in uncharted territory now, in healthcare as well as in a number of other policy matters from alcohol to public school finance to tax collection.

As always, it is our privilege to advocate for psychiatric physicians, your practices, and your patients. Please feel free to reach out with any questions, comments or concerns, but above all, stay safe out there as we all struggle to navigate the pandemic.

April/May 2020 TEXAS PSYCHIATRIST

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401 West 15th Street, Suite 675 Austin, Texas 78701 (512) 478-0605/(512) 478-5223 (FAX) TxPsychiatry@aol.com (E-mail) http://www.txpsych.org (website)

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CALENDAR OF MEETINGS

MAY

16 VIRTUAL CONFERENCE

Texas Society of Psychiatric Physicians and Texas Academy of Psychiatry Spring Meeting and CME Program

"Hot Topics in Clinical Practice: Updates in Psychiatric Care" Registration: Use the Registration Form in this newsletter or Online at www.txpsych.org

JULY

17-19 VIRTUAL CONFERENCE

Texas Society of Child and Adolescent Psychiatry Annual Meeting and Scientific Program

"Mood Dysregulation and Evolving Modalities in the Delivery of Psychiatric Care" Register online at www.txpsych.org Virtual Registration Form coming soon

NOVEMBER

VIRTUAL CONFERENCE

Texas Society of Psychiatric Physicians Annual Convention and Scientific ProgramDates TBD

COVID-19 RESOURCES

Visit the Federation of Texas Psychiatry website www.txpsych.org for a compilation of all of the latest practice resources and links to assist you in responding to COVID-19, both professionally and personally.