The pandemic continues...

J. Clay Sawyer, M.D., DFAPA, Chair, Texas Federation of Psychiatry

I will come as no surprise that we continue to be gripped by the Covid-19 pandemic. On top of that, our entire state was paralyzed in mid-February by a severe winter storm which left millions of Texans without power, without heat, and without water; for many, this severe situation lasted for days on end. In Waco alone, we had six inches of snow preceded by nearly an inch of ice and followed by more ice, with sub-freezing temperatures (the coldest: 1 degree below zero) for eight consecutive days. Other areas of the state experienced even worse conditions. Early analysis appears to show that sensible preparations for winter storms on the part of Texas’ energy industry had been advised, but never took place. The Texas Legislature is presently attempting to address this calamity.

Speaking of the Legislature, the Federation is actively at work in our ongoing tasks of advocating for our patients as we offer education to legislators in the issues involved in that advocacy effort. The foci of our concerns are as follows: our opposition to House Bill (HB) 2029 and Senate Bill (SB) 915, both of which would grant APRNs independent practice privileges; our opposition to HB 1462 which would grant prescribing privileges to psychologists; and, our support for SB 672 regarding collaborative care.

Our opposition to the first three bills stems from our continuing concern for patient safety. Nurses and psychologists all do tremendous and valuable work within the fields for which they are trained, but none are trained to be physicians. We have always maintained that only those fully trained as physicians are qualified to bear the tremendous responsibilities involved in being a physician and in delivering the highest quality care to our patients – we are responsible for their very lives, and the intense training and education we undergo are truly the minimum requirements for assuming this tremendous obligation to the general public and in earning the trust they place in us.

If you would like to comment to the legislature on this issue (please do – numbers matter), you can use this website: texmed.org/grassroots. TMAs home webpage (tmaph.org) has a wealth of information on these and other issues of great concern to the practice of medicine in Texas. And, you can find even more resources on our own webpage (txpsych.org). Please let your voice be heard!

Finally, I must address the continuing pandemic. I have spoken to more than a few people who truly believe that the pandemic is over because of the lifting of the mask mandate in mid-March. This belief could not be further from the truth! The “lowered numbers” regarding new cases, hospitalizations, and fatalities leveled off after a period of decline, but now appear to be gradually increasing yet again. As a nationally-known expert recently stated, “Now is not the time to spike the ball before crossing the goal line!”

We cannot yet let down our guard and assume that the worst is over, not with new mutant forms of the virus beginning to appear in Texas (some of these mutants are feared to be more easily transmissible and potentially more lethal than the original form of the virus), and certainly not with the illusion that those who have been fully vaccinated need no longer take precautions. It is our responsibility to continue to educate the general public that masking, distancing, hand-washing, and avoidance of large crowds in general (and close proximity situations in particular) must be maintained until we attain true herd immunity.

We owe our patients no less.

Make Your Voices Heard

Debra Atkisson, M.D., DFAPA, Vice Chair Public Policy, Texas Federation of Psychiatry

The 87th Legislature is meeting now. And many nonphysicians are making their voices heard loudly about how they can solve the healthcare needs of Texans as soon as the legislature votes for them to have the privilege of independent practice. We physicians value the work our nonphysician team members provide in the care of patients. Physicians know what patients need best and we should be leading the team that provides that care. All of us attended medical school for four years and completed 18,000 to 20,000 hours of postgraduate training. Nurse Practitioners complete 500 to 1500 hours of training. Nurse Practitioners are valuable members of our team, but do not have the education and experience to practice medicine. The rigorous training and experience we receive prepares us to treat patients holistically using the biopsychosocial model.

The bills we MUST speak out about are HB2029 by Stephanie Klick, which will be heard in the House Public Health Committee this week. This bill gives Advanced Practice Nurse Practitioners the legislative approval to practice medicine independently – without going to medical school. Senator Kelly Hancock in the Senate Business and Commerce Committee has filed a companion bill SB915 which approves the independent practice of Nurse Practitioners. The coalition of Nurse Practitioner supporters have made their voices heard – loud and clear – to our legislature.

A bill in the House Public Health Committee granting psychologists the ability to prescribe medications independently, HB 1462 by Vikki Goodwin, has been filed also. Prescribing medications without medical training is a prescription for disaster. Let your Representative know about the dangers involved in letting this bill move forward.

Positive bills filed to help the healthcare of Texans include SB 672 by Senator Dawn Bucykmann, which directs the Health and Human Services Commission to establish a Medicaid collaborative care model as well as providing for the reimbursement for services provided under the model. Telemedicine has proven to be a modality that can reach healthcare needs. A number of bills have been filed to support the ongoing practice and reimbursement of telemedicine/telepsychiatry. Those bills include HB 515 by Rep. Tom Oliverson which ensures payment parity between medical services and telemedicine/telehealth services for plans under the oversight of the Texas Department of Insurance. Companion bills include: HB 522 by Rep. Julie Johnson; HB 888 by Rep. Art Fierro; and SB 228 by Sen. César Blanco.

We have a duty to Texans to speak out about what can help their healthcare – and what can harm them. Make your voice heard this week to your Representative, Senator, and House Public Health Committee. Texans need your voice!
Legislative Session Update

Eric Woemer, Federation of Texas Psychiatric Public Policy Consultant

The 87th Texas Legislature was in full swing when it encountered an unprecedented hurdle in the middle of February. Already faced with the challenges of COVID-19, the Capitol was shut down by an extraordinary winter weather event that overreached the entire state. The severe weather nearly collapsed the state’s energy grid, and left millions of Texans without power and water for days, causing a shift in focus at the Legislature.

Reacting to the extreme winter conditions and responding to the suffering of millions of Texans has become a priority of state government. Due to the crisis, the Legislature lost an entire week where normally, legislators would have conducted the public’s business.

Between the pandemic, this winter weather event, and the budget shortfall, the ability for the legislature to conduct meaningful business has become significantly compromised. Securing passage of legislation is oftentimes difficult in the best of circumstances, and with these three major issues suspended over the capitol dome, we could be in for a legisla-

tive session like Texas has ever seen.

Prior to the winter weather event, Gov. Greg Abbott gave his State of the State address outlining five emergency items for legislators to prioritize this session: expanding broadband access, preventing cities from “defunding” police departments, changing Texas’ bail system, ensuring elections integrity, and protecting businesses from COVID-19 related lawsuits.

This address was followed a few days later by his 2022-23 budget which built on his prior- ities, recommending that the Legislature increase the availability of telepsychiatry, continue the progress made on school finance and property tax reform, and continue to attract jobs and capital investments to the state. Added to the list of these five items is prioritizing this session: expanding broadband access, preventing cities from “defunding” police departments, changing Texas’ bail system, ensuring elections integrity, and protecting businesses from COVID-19 related lawsuits.

As always, it is our pleasure to be your advocate. We are committed to continuing to serve the interests of Texas psychiatrists and our patients for the remainder of the 2021 legislative session.

Advanced Practice Registered Nurses (APRNs): APRNs are telling lawmakers they need the authority to diagnose and prescribe independent of physician supervision, but do not have the needed medical and clinical training. Physician training is very different from that of an APRN: A primary care physi- cian completes between 12,000 and 16,000 hours of competency-based, clinical training, compared with only 500 to 720 hours for APRNs.

APRNs argue they will improve access to care in rural and underserved areas of the state. However, in data from other states where APRNs practice independently, it is clear they migrate and establish practices in urban and suburban areas and not rural, underserved locations. The experience in states like Oregon, Wyoming, and New Mexico demonstrate no real improvements in access to care – especially in rural areas – when those states have granted independent practice and prescribing authority to APRNs.

Filed Legislation: HB 2029 by Repre- sentative Stephanie Klick grants expanded authority for advanced practice registered nurses, SB 915 by Senator Kelly Hancock Senate companion.

Supporting the Collaborative Care Model: The Collaborative Care Model is the integra- tion of behavioral health with general med- ical services to improve patient outcomes, provide for cost savings, and patient satisfac-
tion. Given the pandemic, Texas is seeing an increased need for mental and behavioral health services as many individuals especially children and adolescents are experiencing the effects of the shutdown, the economic recession, and social isolation. These include depression, anxiety, substance use disorder (SUD), overdose, and suicide.

Filed Legislation: SB 672 by Senator Dawn Buckingham directs the Health and Human Services Commission to establish a Medicaid collaborative care model as well as providing for the reimbursement for services provided under the model.

Supporting Telepsychiatry Reimburse- ment Parity and Benefit Access: Telepsychiatry allows psychiatrists to become a part of a patient’s care team at a distance by collaborating with primary care physicians and other providers. To protect patients from the risks of COVID-19, Texas has in place flexi-
bilities for telemedicine and telehealth dur-
ing the public health emergency. Gov. Abbott in his State of the State address made telemedicine and telehealth flexibilities an emergency item, calling on the Legislature to make these flexibilities permanent beyond the pandemic.

Filed Legislation: Several bills have been filed related to telemedicine and telehealth beyond the pandemic – most notably HB 515 by Rep. Tom Oliverson, which ensures pay- ment parity between medical services and telemedicine/telehealth services for plans under the oversight of the Texas Department of Insurance, and HB 4 by Rep. Price and SB 412 by Sen. Dawn Buckingham, which ensure these delivery modalities are reim-
bursed under Medicaid programs (including the provision of audio-only services).

Support Greater Access to Mental Health Medications: Often onerous “prior authoriza-
tion” (PA) requirements designed to control costs may diminish access to medications and deter adherence. Poorly designed or bur-
desome PAs may frustrate patients, and contribute to medication abandonment, self-
medication with legal or illicit substances, and/or increase risk of adverse treatment out-
comes. As a result, individuals with SMI that incur access challenges face triple the likeli-
hood of adverse events, including ER visits; as such, a considerably higher number of adverse events increases state expenditures.

Filed Legislation: SB 674 by Sen. Dawn Buckingham and HB 2822 by Rep. Lacey Hall improve the availability of antipsychotic pre-
scription drugs under Medicaid managed care. SB2051 by Sen. Jose Menendez and HB 2594 by Rep. Jessica Gonzalez restrict health insurance plans from imposing fail first require-
ments on mental health medications for patients with severe mental illness.

Supporting a Texas Waiver Related to Medicaid IMD Exclusion: Currently, federal law prohibits states from using Medicaid to pay for care provided in inpatient psychiatric hospitals known as IMDS, or “institu-
tions of mental disease.” This exclusion has been part of the program since Medicaid’s enactment in 1965, and it has resulted in unequal coverage of mental health care.

States have recently been given the option to cover short-term stays in IMDS under Medicaid by applying for an 1115 from the federal government.

Filed Legislation: No bill has been filed;
HHsc may be directed to pursue an IMD waiver through the state budget process.

Supporting the Continuation of Tax-Free 3rd Party Medical Billing Services: The Texas Comptroller published in 2019 that medical practices that use third-party medical billing services would be required to pay sales and use taxes on those services beginning January 1, 2020. This would disproportionately impact small medical practices that do not perform medical billing in-house.

The Comptroller delayed action until October 1, 2021, after the Legislative session, meeting, giving advocacy groups time to seek a permanent legislative fix.

Filed Legislation: HB 1445 by Rep. Tom Oliverson keeps 3rd party medical billing services as tax-free.

As always, it is our pleasure to be your voice at the Texas state capitol. Please feel free to reach out with any questions, comments or concerns that you may have. We look forward to continuing to serve the interests of Texas psychiatrists and our patients for the remainder of the 2021 legislative session.
A new era of APRN legislation is currently in session. Bills to expand the scope of practice for Advance Practice Registered Nurses (APRNs) to work independently from physician supervision and for Psychologists to obtain prescribing privileges have been filed. It is imperative that we contact our state senators and house members to voice our opposition to these bills. HB 2029 and SB 915 would allow APNs to independently prescribe medication including controlled substances, order and interpret labs, and order medical equipment without physician supervision. HB 1462 supports extension of prescribing privileges to clinical psychologists. The rationale behind these bills is that granting APN’s independent practice and psychologists prescribing privileges will increase access for patients especially in rural areas of the state. In the new states where these scope of practice bills were enacted the impact on access has been negligible. APRNs working under physician supervision has allowed physicians to increase case loads providing better access to care but maintaining patient safety by allowing physicians to focus on more complicated cases. Surveys of Texas voters indicate that 60% of state voters oppose allowing APNs to practice medicine outside of physician supervision. The website www.senate.texas.gov and www.house.texas.gov can lead you to your senator and house members contact information.

I urge you all to call or email your state Senator and House member ASAP indicate that you are a physician and that you strongly oppose these scope of practice bills. You may want to include some of the talking points bulletted below as developed by the TMA and TSPP as well as any anecdotal reports that support your opposition to these bills.

- APRN training is 500-1000 hours compared to physician training of 12,000 - 16,000 hours.
- There are no national standards for APRN training programs many of which are completed online.
- With the advance of telemedicine during the pandemic access has already been enhanced with APNs working under physician delegation.
- Physician training and education uniquely qualify them to determine if a medical act can be safely delegated to an APRN acting under their supervision. This model of team care is integral to improving access to and coordination of quality of patient care.
- Other more favorable bills that will greatly enhance physician practice and ease of patient care includes bills to support of a Medicaid Collaborative Care model, support continued reimbursement of telepsychiatry reimbursement parity, ease of onerous, prior authorization requirements, a waiver related to easing the Medicaid IMD exclusion which excludes reimbursements for adults in free standing psychiatric inpatient facilities, and to maintain 3rd party medical billing services as tax free.

It is very important that we as physicians get to know our state legislative representatives by educating them on issues important to us and our patients. An opportune time for this is when they solicit your vote ask them about their stand on issues important to physicians and also consider a contribution to support their candidacy.

We can all agree that 2020 was a challenging year and we looked forward to 2021 with hopeful optimism. However, the recent winter storms caught our energy infrastructure off guard and wreaked havoc on many communities across our state. Here in the Houston area many continue to deal with the aftermath of broken pipes and extensive water damage to their homes. The pandemic continues with threats of a third wave due to variant strains. Racial injustice, polarized political parties, economic concern, income disparities present further challenges to overcome. Despite all of these problems we must remain hopeful and recognize that we have faced even greater challenges in the past and with faith, hard work and determination we can learn from our struggles and emerge wiser and stronger. Take care and be well.

Let’s Do This…We Need You!
Michael R. Arambula, MD, PharmD, DLFAPA, President, Texas Society of Psychiatry Physicians

My father once told me how enthusiastic he and his brothers were to serve our country during World War II. Although my dad’s brothers never made it back, I nevertheless learned the value of service growing up. My parents also taught me the value of hard work and doing better tomorrow, what I could accomplish today. I could go on and on…

This past weekend, I spoke of our unique, specialized training as psychiatric physicians, and our future as an organization. As to the former, I certainly remember delivering babies when I was on call and wondered why they always decided to enter our world during the wee early hours of the morning. I also remember saturating patients in the emergency room, holding retractor deer during surgery, collecting bone marrow aspirate, and witnessing a lot of death due to tragic disease and accidents. The point being that I and we, all have similar memories because we are first, physicians. Human physiology is truly amazing and our brain, where the psyche resides, is even more amazing. I love the human interaction in Psychiatry. But haven’t you noticed that most of our patients harbor pathophysiologic disease? In the coming year, I’d like for us to refresh our knowledge about the medical conditions which our patients commonly have. I already have friends / colleagues in other medical specialties who I will ask to submit a brief article for our newsletter, and hope that our stellar CME Committee will routinely add presentations regarding the same. I believe this endeavor will also facilitate networking opportunities with our medical colleagues. I’d also like to collect and assimilate in our website, brief articles about the identification and treatment of mental illnesses, and what we do as psychiatric physicians; so that we can be a valid and reliable resource for the public. As to the latter, I also spoke of the profound impact which my mentors had upon my career. Although I have fondly held these memories for many years, it wasn’t until I virtually sat down with our RFM colleagues - Kaylee and Juan - that our conversation reminded me of those moments I spent with my mentors. Indeed, they were my foundation upon which I had the confidence to dream big, work hard and achieve success that I never imagined I could. That pillar of medical training - ‘See One, Do One, Teach One’ - echoes in my ears when I think about them. During the coming year, I want to build upon the tremendous visionary aspirations that Melissa and Tim spoke to me about, regarding our colleagues in training. Our Psychiatry Residents and Early Career Psychiatrists are our future. The Strategic Planning Task Force is currently assimilating a platform to facilitate mentoring relationships with our young colleagues; and I hope that you will join me in our endeavor. I also want to give our young colleagues opportunities to publish and present (within our organization), and to help them compete for APA Fellowship awards and subspecialty Fellowship positions all over the country…as long as they come back to Texas! I sound like a broken record but nevertheless, I will say it again. My ancestors, my parents and my mentors carried me on their shoulders for a bit, and then they gave me a nudge to explore, succeed and sometimes fall and get back up again… and also to serve. Let’s do this... together.

Join Me in TSPP’s Future Endeavors

Congratulations and Installation of new TSPP officers 2021-22:
President
Michael Arambula, MD, Pharm D, DLFAPA
President Elect
Karen Dineen Wagner, MD, PhD
Secretary-Treasurer
Lynda Parker, MD
Immediate Past President
Timothy Wolff, MD

APRIL/MAY 2021
Texas Psychiatrist 3
Cutting Edge Psychiatry
in the Time of COVID

VIRTUAL LIVE CME WEBINAR
Saturday, April 17, 2021

Five (5) AMA PRA Category 1 Credits™, with 2 hours of Designated for Medical Ethics/Professional Responsibility

Scientific Program Schedule
Presented in Central Time Zone

9:15 am - 9:25 am
Log onto Virtual Webinar (Zoom) to be admitted to the CME Program, starts promptly at 9:30 am.

9:30 am
Welcome and Introductions - Open Remarks / CME Accreditation Statements and Certificate of Attendance Information

9:35 am - 10:40 am
"Physician Support Line – Confidential Peer-to-Peer Physician Self Care and Prevention of Burnout: One Grassroots Solution for Stressors of COVID and Beyond" Modular 1: Mona Masood, DO and Smita Gauam, MD

Introduction: 45 Minute Presentation; 15 Minute Q&A with Audience 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 at risk physicians
- Employ effective crisis management / problem focused techniques.

10:40 am - 11:15 am
"Treatment of Depression in the Medically Ill Patient" Mark E. Kunik, MD, MPH, DFAPA

Introduction: 45 Minute Presentation; 15 Minute Q&A with Audience 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 pathways to depression in the medically ill
- Discuss risks and benefits for stepped care treatment in the medically ill and modify to reduce risk and improve treatment results
- Discuss strategies to improve communication between primary care clinicians and psychiatrists in treating patients with depression and medical co-morbidities.

11:15 am - 12:00 pm Break

12:00 pm - 2:05 pm
ETHICS: "Ethics and Telepsychiatry"
Avrim B. Fishkind, MD

Introduction: 1.5 Hours Presentation; 30 Minute Q&A with Audience 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 new receptor mechanisms for new drugs.
- Describe and chart the timeline for release of drugs.
- Calculate early results of trials.

2:05 pm - 2:50 pm Break

2:20 pm - 3:25 pm
"Novel Pharmacological Treatments for Schizophrenia" Stephen R. Saklad, MD, Pharm.D., BCPP

Introduction: 45 Minute Presentation; 15 Minute Q&A with Audience Objectives: The learning objectives for this activity have been designed to address clinician competence. Upon conclusion of the activity, participants should be able to:
- Translate its' primary target audience of Psychiatrists, PAs, and other health care professionals.
- Recognize and apply effects of telepsychiatry on team-based care.

3:25 pm - 3:50 pm
Closing Remarks

CME PROGRAM GOAL / TARGET AUDIENCE
This live activity has been designed to meet the needs of health care professionals in a hybrid format with case examples followed by an interactive audience question and answer period to provide a virtual target audience of psychiatrists, as well as other specialists 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 physicians’ 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
TSSP 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. Patients with depression and medical co-morbidities may be under-treated due to barriers about medical co-morbidities, and psychiatrists and primary care clinicians may have difficulty communicating and understanding the risks and benefits of psychotropic medications in these patients. The presentation will provide an update on best practices in treating patients with depression and medical co-morbidities to increase their knowledge and competence. The COVID-19 pandemic has caused a rapid shift to telemedicine work. Usual laws like HIPAA have been suspended to allow greater access to patients at risk for mental health issues. OMS has targeted all psychiatrists to begin making telemedicine and telephone visits equivalent to in-person visits. However, practitioners may not be fully aware of the impact of telework on the therapeutic relationship, confidentiality issues, the accessibility to some apps and platforms to breaches in confidentiality and how this affects provision of safe and optimal care. Psychiatrists need to be updated on the development, timeline for release of new medications, early results of trials / pre-market experience with novel drugs for schizophrenia. COVID-19 has added additional stressors to psychiatrists and physicians. Psychiatrists need to be educated about Physician Support Line, a peer-to-peer physician self-care and prevention of burnout, understand what resources, what can be accomplished and how to access support in a phone help line for physicians during the pandemic and beyond.

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 sponsorship 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 1 Credits™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ETHICS DESIGNATION STATEMENT
The presentation "Ethics and Telepsychiatry" has been designated by the Texas Society of Psychiatric Physicians for two (2) hours of education in medical ethics and/or professional responsibility.

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 Psychiatric Physicians implemented a mechanism to identify and resolve potential conflicts of interest from everyone who was in a position to control the content of the education activity. TSSP will disclose to learners the existence (or non-existence) of all relevant financial relationships 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 oral communication and inclusion on the beginning slide of the program.

Speakers

Mark Kunik, MD, M.P.H, DFAPA
Director, VA South Central Mental Illness Research, Education and Clinical Center (RECC)
Chief, QUEST Behavioral Health and Implementation Program
Professor
Menninger Department of Psychiatry and Behavioral Science
Houston, Texas

Avrim B. Fishkind, MD
Consultant-Clinician: Emergency Psychiatry, Telepsychiatry and Psychiatric Emergency Services Design Empathic Soul Health, LLC
Former General Manager
SOC Telemedicine

Former Chief Executive and Chief Medical Officer, Owner
JSA Health Telepsychiatry
Houston, Texas

Smita Gauam, MD
Co-Founder, Collaboration Coordinator and Volunteer Coordinator of Physician Support Line
Board Certified Child and Adolescent Psychiatry
The Family Institute, A Non-Profit Organization Affiliated with Northwestern University
Involved in Community Mental Health Education in Chicago and Northern Suburbs
Chicago, Illinois

Mona Masood, DO
Founder and Chief Organizer of Physician Support Line
Board Certified in General Adult Psychiatry
Outpatient Psychiatrist, Greater Philadelphia Area

Stephen R. Saklad, MD, Pharm.D., BCPP
Director, Psychiatric Pharmacy Program
Pharmacotherapy Education and Research Center
UT Health Science Center
San Antonio, Texas

Clinical Professor
Pharmacotherapy Division
The University of Texas at Austin College of Pharmacy

Adjunct Professor
School of Medicine
Pharmacotherapy Education and Research Center
UT Health Science Center San Antonio

Clinical Pharmacologist
San Antonio State Hospital
Texas Department of State Health Service
approximately one week prior to the CME webinar, you will receive an email at the email address you provided on your registration form with the zoom meeting ID and link to join the meeting on April 17. If you do not already have the free Zoom account loaded on your device, you will need to do so prior to April 17 in order to access the program. Please refer to the Zoom Guide for additional information and/or questions. The program will begin promptly at 9:30 am so please plan to log on between 9:15-9:30 am to allow time to address and eliminate any access difficulties you may have. Thank you for registering!
VIRTUAL LIVE CME WEBINAR • Saturday, July 24, 2021

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 Society of Child and Adolescent Psychiatry. The Texas Society of Psychiatric Physicians is accredited by TMA to provide continuing education for physicians.

CREDIT STATEMENT
The Texas Society of Psychiatric Physicians designates this Virtual Live Activity for a maximum of six (6) AMA PRA Category I Credits™ Physicians should claim only the credit commensurate with the extent of their participation in the activity.

ETHICS DESIGNATION STATEMENT
The Ethics Presentation: “Racism, Making the Case for PTSD” and “Seclusion and Restraint in Correctional Setting” have been designated by the Texas Society of Psychiatric Physicians for a total of two (2) credits of education in medical ethics and/or professional responsibility.

TARGET AUDIENCE/PROGRAM OBJECTIVES
This virtual activity has been designed with didactic lectures supplemented with panel discussion; clinical vignettes; audiovisual presentations and question and answer discussion in multiple educational sessions.

The program is designed to provide its’ target audience of Child and Adolescent Psychiatrists, Adult Psychiatrists, Pediatricians and Primary Care Physicians with clinically relevant information to advance the physicians’ competence and provide them with effective use of targeted skills so that they may develop strategies to apply the knowledge, skills and judgement of the information presented in the educational activity into their practice.

NEEDS ASSESSMENT
TSCP has incorporated into this CME activity the relevant educational needs concerning competence that underlie the professional practice gaps of the participants.

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 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. TSSP will disclose to learners the existence (or non-existence) of all relevant financial relationships (that the faculty and planners did (or did not) have with any commercial interests concerned with the content of the educational presentation. Disclosure will occur at the beginning of the Virtual CME Activity through verbal and written slide display.

SPEAKERS

Pierre W. Banks, EdD
Senior Director of Admissions and Recruitment
Clinical Assistant Professor - Psychiatry and Behavioral Sciences
Sr. Specialist, Learning and Career Counseling
University of Texas Medical Branch
Galveston, Texas

Lisa Falls, MD
Associate Professor
Department of Psychiatry
University of Texas Medical Branch
Galveston, Texas

Mohsin Khan, MD
Assistant Professor of Psychiatry
UT Southwestern Medical Center
Rees Jones Center for Foster Care Excellence
Dallas, Texas

Claudia G Mercado, MD
Family Medicine Specialist
Border Clinic PLLC
Laredo, Texas

Joseph V. Penn, MD, CCHP, FAPA
Director, Mental Health Services
UTMB Correctional Managed Care
Clinical Professor
UTMB Department of Psychiatry
Galveston, Texas

Steven R. Pliszka MD
Professor and Chair
Department of Psychiatry and Behavioral Sciences
Joe R and Theresa Long Lozano School of Medicine
UT Health San Antonio
San Antonio, Texas

Kimberly E. Stone, MD, MPH, FAAP
Assistant Professor of Pediatrics
Rees-Jones Foster Care Center for Excellence
Children's Health System
Dallas, Texas

Texas Society of Child and Adolescent Psychiatry

VIRTUAL LIVE CME WEBINAR
Saturday, July 24

REGISTRATION FORM
When your registration payment has been processed, about one week prior to the meeting, 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, July 24. It is IMPORTANT that the email address you list on the Registration Form is the email you will use to participate on the Zoom Meeting or Zoom will not recognize and allow you to log into the meeting. If you do not already have Zoom loaded on your device with the email address you provide on your Registration Form, you will not be able to access the program. Please refer to the Zoom Guide attachment for instructions to access the meeting.

The program will begin promptly at 9:00 am so please log on about 5-10 minutes prior to 9:00 am. Thank you for registering!

Make Checks payable to Texas Society of Child and Adolescent Psychiatry

MAIL---(by mail or Federal Express only)
Texas Society of Child and Adolescent Physicians
401 West 15th Street, Suite 675, Austin, TX 78701

E-MAIL ONLINE
tscpp@eol.com
http://www.tscap.org

PHONE
312.479.5223
312.479.8095

To register payment online, complete this form and return to tscpp@eol.com via email and request an email receipt from QuickBooks Online.

REGISTRATION FEE SCHEDULE

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REGISTRATION INFORMATION

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http://www.txpsych.org (website)

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**CALENDAR OF MEETINGS**

**APRIL**
17 Texas Society of Psychiatric Physicians and Texas Academy of Psychiatry Virtual CME Program “Cutting Edge Psychiatry in the Time of COVID”

**JULY**
24 Texas Society of Child and Adolescent Psychiatry Virtual CME Program “Child Psychiatry at the Crossroads: Focus on At Risk Populations and Social Change”

**NOVEMBER**
6 Texas Society of Psychiatric Physicians Virtual CME Program

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