APA Assembly Representative Report

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I was privileged to represent Nebraska Psychiatric Society as an Assembly representative at the Fall APA Assembly Meeting in November 2017 in Washington, D.C. Here are the highlights of the meeting:

American Psychiatric Excellence Awards Luncheon

This year, as an added treat, the Assembly was invited to a luncheon in honor of this year’s recipients of the American Psychiatric Excellence, or APEX, Awards. The APEX Awards were first proposed by Past President Renee Binder, MD. This year’s recipients include Kathryn Farinholt, Executive Director of NAMI Maryland, Representative Jenniffer González-Colón of Puerto Rico, Senator Brian Schatz of Hawaii, Eric Eyre, reporter for the Charleston Gazette-Mail, and Senator Debbie Stabenow of Michigan.

Report from the APA President — Anita Everett, M.D.

Dr. Everett identifies 3 priorities to be addressed through workgroups she has convened during her term as president of the APA. The first priority is membership support. One workgroup is exploring ways to expand member involvement and access to the APA’s autumn Institute for Psychiatric Services meeting, and another workgroup explores and develops strategies for the state district branches and associations in addressing scope of practice legislation. A second priority is innovation to enhance the practice of psychiatry. Dr. Everett showed a video featuring Robert Graboyes’ comments on the reluctance of medical providers and insurers to embrace innovation. Dr. Everett seeks feedback from Assembly reps and APA members: Why have psychiatrists been slow to embrace innovation in our own practices?

Dr. Everett introduced Richard Summers, MD, the chair of the workgroup on physician well-being and burnout. Dr. Summers presented some of the preliminary recommendations of the workgroup. The “Triple-Aim” of healthcare reform should be reformulated as the “Quadruple Aim,” which should include physician well-being as its 4th leg. Healthcare organizational systems must be designed to reflect human needs. For physicians especially, this should include autonomy of practice. The workgroup also recommends developing leaders in healthcare with “participative management competency,” (i.e. clinical experience) rather than those without practice experience. Other recommendations include developing social communities, removing sources of frustration and inefficiency, reducing preventable harm and supporting secondary victims, and bolstering individual wellness. Upcoming products from the workgroup include an online portal, toolkits, and advocacy resources.

The APA has a website: www.psychiatry.org/wellbeing. Everyone is encouraged try this link, which will give you a self-assessment of your own wellbeing and risk for burnout. The data is being collected without identifying information.
Special Election and Nominations for Speaker-elect and Recorder

The Assembly held a special election for the office of Recorder, formerly won by Steven Daviss, MD last spring. However, Dr. Daviss has resigned to avoid further potential conflict of interest between the APA and SAMHSA, where he has recently been hired. To replace him, 3 candidates were nominated. Paul O’Leary, MD, will be the Assembly Recorder for this year. Regular elections for officers will be held in May 2018. The nominees for office for next year are:

Speaker-elect: Paul O’Leary, MD (Area 5) and C. Deborah Cross, MD (Area 2)
Recorder: Jake Behrens, MD (Area 4), Steve Brown, MD (Area 7) and Seeth Vivek, MD (Area 2).

Report of the CEO/Medical Director of the APA — Saul Levin, MD, MPA

Dr. Levin announced that the APA membership has exceeded the number of members we had in 2002, the last year that PharmA was involved with the APA. APA continues to use CMS Transforming Clinical Practice Initiative (TCPI)-Support and Alignment Network (SAN) Grant funds awarded from CMS for training psychiatrists to integrate with primary care providers in Collaborative Care (CC). APA opposes efforts by the Joint Commission to enforce CMS regulations regarding ligature-use risks. As a result of a recent incident involving a patient in restraints, the JC declared all risks will be corrected, but the rollout has been unduly burdensome. APA will participate in a CMS task force in December to improve the implementation process with new guidelines due in 6 months. APA is mobilizing to provide disaster relief for the many affected around the country. These efforts include the Lindemann Disaster Relief Grant and dues relief for psychiatrists whose practices are directly impacted by disasters, as well as APAF efforts to raise funds for the Red Cross. In addition, APA members have created “Crear Con Salud (Create With Health)” a non-profit to provide supplies and mental health resources to Puerto Rico. APA spoke to members of Congress against the Graham-Cassidy Bill. APA joined with other medical groups – AAFP, AAP, ACP, ACOG, and AOA – calling themselves the “Group of 6,” which eventually helped defeat the bill. APA is also supporting efforts to preserve the ACA and CHIP, both of which face cuts in funding which threaten their continued existence. APA continues to work for Maintenance of Certification (MOC) reform and to ensure insurers do not limit their network panels to physicians with MOC only. APA participates in a commission to evaluate the MOC process across ABMS boards. Expect a guidance report from the ABMS by 2019. Finally, work continues toward completion of the APA’s new K Street headquarters in Washington, DC.

Presentation of the Speaker’s Award — Theresa Miskimen, MD

Dr. Miskimen presented the Speaker’s Award to Roger Peele, MD. In her speech, Dr. Miskimen touched on the highlights of Dr. Peele’s longstanding work in the Assembly since 1975. She recalled his welcoming manner at their first encounter and his message: Psychiatrists have an ulterior mission to serve our patients and our communities. Dr. Peele has been the most prolific author of Action Papers in the Assembly, including a call for practice guidelines and development of Performance Improvement Project (PIP) guidelines. Dr. Eliot Sorel added his praise for Dr. Peele as one of the most influential members in the history of the Assembly. In accepting his award, Dr. Peele reminded us that he also proposed a referendum which did not pass, but in which 57% of members who did vote wanted the Assembly to be the governing body of the APA, rather than the Board of Trustees.
Contributions by the Assembly to the APA Foundation this weekend have been nearly $30,000 from 57% of Assembly members. Contributions to the Annual Fund were $16,000, and to Disaster Relief another $11,000. A Saturday evening reception and fundraiser organized by Dr. Batterson for disaster relief raised $6,550 alone. The Foundation’s Disaster Relief fund directs contributions to the Red Cross Disaster Services, MH Program, which deploys MH volunteers to affected areas and addresses the psychological impact of trauma and disaster-related events. The Foundation also funds projects involving research, clinical training, mental health awareness, public safety, and grants and fellowships. In the new APA Headquarters APAF will have historical exhibits, an expanded library and reference room, rare book collection, and artifacts exhibit and memorabilia.

APA Position Statements

The following Position Statements were approved on at the Assembly, including:

**Retire:**
- Review of Sentences for Juveniles Serving Lengthy Mandatory Terms of Imprisonment
- Psychiatry and Primary Care Integration across the Lifespan

**Retain:**
* Endorsement of United States Ratification of the Convention of the Rights of the Child
* Use of Jails to Hold Persons Without Criminal Charges Who are Awaiting Civil Psychiatric Hospital Beds
* Psychiatric Services in Jails and Prisons
* Assessing the Risk for Violence
* Firearms Access: Inquiries in Clinical Settings
* Homicide Prevention and Gun Control
* Segregation of Prisoners with Mental Illness

Remuneration for Psychiatrists’ Time Performing Utilization Review (Endorsement of AMA policy H-385,951)
* Universal Access to Health Care

**Proposed:**
- Human Rights
- Human Trafficking
- Police Interactions with Persons with Mental Illness
- Lengthy Sentences Without Parole for Juveniles
- Domestic Violence Against Women
- Prevention of Violence

The following Position Statement was rejected by the Assembly:

Revisions to Position Statement: Need to Maintain Long-Term Care Facilities for Certain Individuals with Serious Mental Illness

Action Papers/Items

Among the Actions taken during this session, the Assembly voted to

- Approve Civil Liability Coverage for District Branch Ethics Investigations by informing DB’s of their liability protection coverages, amending APA Operations Manual to reflect current
coverages for DB Ethics Committees investigations, and develop policies and protocols to protect Ethics Committees
• Have the APA Create a Council on Women's Mental Health.
• Create a Task Force Addressing the Negative Impact of the Rule of 95 on Membership Dues Revenue
• Developing Measures to Help Members Join Caucuses by including a link on new and renewal membership dues statements*
• Achieve Congruence between the APA Commentary on Ethics in Practice and the AMA Principles of Medical Ethics Concerning Ethical Obligations of Psychiatrists Making Benefit Determination Decisions, by having the authors of the APA Commentary on Ethics in Practice revise their language to be more consistent with that of the AMA Principles of Medical Ethics, which would apply to ALL psychiatrists, regardless of standing in a benefits organization.
• Recommend Adopting an APA Position Statement Supporting Implementation of the Mental Health Parity and Addiction Equity Act (MHPAEA or parity law) as proposed by the authors of the Action Paper, including details on development, implementation, and oversight of MHSUD treatment coverage by insurers and other third parties. The paper did not pass a vote to forward immediately to the BOT for a vote.
• Approve an Additional Joint Meeting of the Council on Minority Mental Health and Health Disparities and the Assembly Committee of Representatives of Minority/Underrepresented Groups at the September APA Components Meeting (which was also approved by the JRC).
• Have the APA Annual Meeting Scientific Program Committee Address Conflicts of Interest Not Limited to Pharmaceutical Companies.
• Create a Non-Physician Registration Fee for Allied Health Professionals to attend APA Annual Meetings.
• Adopt a proposed Position Statement: Recommending Twelve Weeks of Paid Parental Leave,
• Enact APA Positions: State Medical Board Licensure Queries regarding Mental Health of physicians by enforcing current APA positions opposing such enquiries and gathering and reporting data regarding which licensing boards are or are not in compliance.
• Have APA develop a Position Statement on Recognition of Psychiatric Expertise: Efficiency and Sufficiency in which MOC should not be a requirement for licensure (including interstate compacts), hospital privileges, insurance panels, or employment and to support Self-Assessment CME as a sufficient alternative to MOC for these purposes.
• Reject a Proposal of an APA Member Survey on Medical Aid in Dying as Option for End-of-Life Care.
• Designate Psychiatry as Primary Care for Any Medical School Scholarships Requiring Primary Care Service by advocating for such scholarships at the state and federal level.
• Encourage Medical School Loan Repayment Subsidies for Psychiatrists Practicing in Community Mental Health Centers and State Psychiatric Facilities through state and federal advocacy.
• Advocate for improved patient access to Transitional Care Services Post-Psychiatric Hospitalization through increased federal funding and greater focus in training programs.
• Urge APA to Address the Negative Impact of New Joint Commission and CMS Policies on Ligature Risk on Inpatient Psychiatric Units by delaying implementation until CMS review of the policy is completed.

(Items with a * were approved by consent)
Assembly Committee on Public & Community Psychiatry - Group members have authored several action papers this session and addressed issues in several groups and caucuses.

Assembly Committee on Psychiatric Diagnosis & the DSM – The Committee urges Assembly representatives to solicit feedback on DSM-5 from constituent DB members.

Assembly Committee on Access to Care – Discussions focused on grassroots organizations and the psychiatrists that serve them. We need to stay alert and aware to issues that affect access: manpower shortages, managed care, immigrant access, and restrictive formularies. NY has developed a hotline to increase access for immigrants.

Assembly Committee on Maintenance of Certification – Committee members authored a successful AP this meeting. The committee is pleased that APA CEO is involved in the issue. The ABPN will roll out an alternative "third pathway" to MOC, beginning in 2019.

Assembly Liaisons to the Committee on Practice Guidelines – Several guidelines will be coming up for review. A commercial group had been doing the researches. This will be changing to a private group that will do the searches that allow the workgroups to develop the questions to query the development of the guidelines.

It is my hope you’ll find this information helpful and of benefit. Should you need more information please go to the APA website for details.

Respectfully submitted,

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Adapted from
(Nelson, 2017)