Minnesota Psychiatry Welcomes New Leaders

Eduardo Colón, MD

Eduardo Colón, MD, has been named the new Chief of the HCMC/Hennepin Health System Department of Psychiatry.

Dr. Colón has served as Vice-Chief of the department since 1998. He started at HCMC as an intern in 1979 and completed his residency and fellowship at the University of Minnesota, where he is a professor in the Department of Psychiatry. He has been an active administrative leader, teacher, researcher, and clinician throughout his career. He also has the respect of the psychiatric community locally and across the state.

The mission of the Department of Psychiatry is to provide a full spectrum of services for those with major behavioral and emotional difficulties, especially the serious and persistently mentally ill population in the metro and beyond.

Sophia Vinogradov, MD

Sophia Vinogradov, MD, has just recently been appointed Donald W. Hastings Endowed Chair in Psychiatry and Department Head of Psychiatry at the University of Minnesota Medical School. She was previously the Vice-Chair of the Department of Psychiatry at the University of California, San Francisco, and Associate Chief of Staff for Mental Health at the San Francisco VA Medical Center. She received her MD from Wayne State University School of Medicine, obtained her psychiatry residency training at Stanford University School of Medicine, where she served as Chief Resident, and completed a Psychiatric Neurosciences Research Fellowship at the Palo Alto VA Medical Center and Stanford University.

Dr. Vinogradov directs a translational clinical neuroscience laboratory that focuses on cognitive dysfunction in schizophrenia. In collaboration with basic scientists, she studies neuroscience-informed computerized cognitive training exercises for patients with schizophrenia that aim to drive enduring plastic changes in cortical processing. Dr. Vinogradov uses MEG and fMRI methods to probe the brain changes in both early sensory processing and higher-order cognitive operations in subjects who undergo this cognitive training. More recently, she has begun to apply these methods to the study of adolescents who are prodromal for schizophrenia and young adults in early psychosis, with the goal of delaying or preventing the onset of a deteriorating psychiatric illness. Her work has contributed to a growing interest in the use of computerized “brain training” to treat some of the brain information processing abnormalities of psychiatric illnesses, and she was a participant at the White House conference on “Video Games to Enhance Attention and Well-Being.”
Editor's Column
Allison Holt, MD

The Minnesota Medical Association House of Delegates (HOD) will meet again for the first time in three years at the MMA convention this year. In 2013, the HOD was suspended and a new body, the Policy Council, replaced the HOD for a trial of three years. At the meeting of the HOD this year, which takes place at 7:45 am on Saturday, September 24th at the MMA convention, the delegates will vote on a resolution that proposes permanent dissolution of the HOD.

The HOD is made up of a maximum of 262 members appointed by component medical societies, specialty societies, sections, and at-large members with no component society by the MMA. The HOD has authority over the Board, but is advisory in nature. There are 40 appointed Policy Council members and they are charged with synthesizing member input and making recommendations to the Board of Trustees on policy issues.

Any MMA member can comment on this issue at the meeting. The MMA encourages all members to review the resolution and the background materials and provide feedback. You can comment by sending an email to mma@mail.mnmed.org. If you want to make changes to the resolution you have to be a delegate.

Unfortunately, the HOD meeting is on the same day as the NAMI Walk. The up-side is that we have a choice for how we want to be active in our community — not a bad choice! We hope to see you at one of these events.

MPS Fall Meeting on Mood Disorders
Join us October 11
Features Experts from Mayo Clinic University of Minnesota, VA Medical Center, and more!
Highly Interactive Format — Receptor Treatment

Go to www.MnPsychSoc.org to register or call 651-407-1873 for more information.

Cost of Direct Care and Treatment

A bulletin from DHS outlines the per diem rates as of July 1, 2016, for direct care and treatment facilities such as Anoka, CBHPS program, and the Minnesota Security Hospital. The per diem reflects the sum of all anticipated costs divided by the projected patient days in treatment. A few facilities and their rates are listed below. The full bulletin is on the DHS website.

Mental Health Services

<table>
<thead>
<tr>
<th>Facility</th>
<th>Per Diem Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>Anoka Metro Regional Treatment Center (AMRTC)</td>
<td>$1,375</td>
</tr>
<tr>
<td>Child and Adolescent Behavioral Services (CABS)</td>
<td>$3,362</td>
</tr>
<tr>
<td>Community Behavioral Health Hospitals (CBH)</td>
<td>$1,866</td>
</tr>
<tr>
<td>Minnesota Security Hospital (MSH)</td>
<td>$670</td>
</tr>
<tr>
<td>Competency Restoration Program (CRP)</td>
<td>$744</td>
</tr>
</tbody>
</table>

Mood disorders are among the most common and burdensome of mental health conditions — the World Health Organization (WHO) considers major depression as the third-highest cause of disease burden worldwide. They are also difficult to treat. Up to a third of MDD patients do not respond to conventional antidepressants, and rates of poor response to pharmacotherapy and non-pharmacological interventions are even higher for patients with bipolar I or II depression. Specific clinical contexts such as pregnancy, the postpartum period, advanced age, and adolescence, and rapidly evolving treatment approaches add to the complexity of treating mood disorders in the modern clinical environment. This symposium will address these issues. Participants will learn of new findings in the assessment and treatment of mood disorders across the age spectrum and in special patient populations, including the use of neuro-modulatory approaches for difficult-to-treat mood syndromes.

Planners have developed an interactive program enhanced with hands-on demonstrations. The program was designed by and for psychiatrists, but all mental health professionals and health professionals are welcome, including students and residents. Participants will be able to:

- Review up-to-date research findings and treatment tactics as applied to the treatment of adults with bipolar depression.
- Describe effective strategies for diagnosing and treating adolescents with depressive disorders.
- Appraise the current state of knowledge in the field regarding ketamine for treatment-resistant unipolar and bipolar depression.
- Describe effective strategies for screening, diagnosing, and treating depressive disorders in elderly adults.
- Review effective strategies for screening, diagnosing, and treating postpartum mood and anxiety disorders.
- Review the clinical application, published research, and latest evidence for the use of transcranial magnetic stimulation (TMS) for difficult-to-treat cases of major depression.
- Identify key non-pharmacological approaches to the formulation and management of patients with borderline personality disorder or features.
- Discuss future applications of existing neuromodulation therapies and the promise of the future and beyond, and define the most promising neuromodulatory technologies and approaches to treating neuromodulatory disorders currently in development.
- Join presenters and others for a reception immediately following the program at the Minnesota Humanities Center in St. Paul. Register online at www.MnPsychSoc.org for October 11.
2016 Gloria Segal Medical Student Award Winners

MPS gives the Gloria Segal Medical Student Award to fourth year medical students who demonstrate excellence in the care of psychiatric patients, show outstanding performance during pre-clinical and clinical rotations in psychiatry, and exhibit enthusiasm for the psychiatric profession. Award winners demonstrate excellence in scholarly and/or research activities and community involvement on behalf of those with mental illness. Congratulations to our winners!

Jimmy Wang

Junas (Jimmy) Wang has a wide array of professional, academic, scientific, and voluntary experiences that could have lead him in a number of directions. Psychiatry won the day, and those experiences will serve him (and his future patients!) well. His research covers pediatrics and endocrinology, as well as psychiatry which he has been part of cutting-edge research around Transcranial Magnetic Stimulation. His professional experiences as a community advisor and in primary care clinics have given him the opportunity to work directly with patients. He is a member of the APA, the American College of Physicians, and the American Medical Student Association. His poster presentations tie together his research and professional experiences to offer unique strategies for implementation and practice. His volunteer time focuses on service to those in need. The good news is that Jimmy will be a member of the next class of psychiatry residents at the University of Minnesota! Congratulations, Jimmy Wang!

The Mayo Medical School decided to honor two recipients this year: Nihil (Sunny) Patel and Keith Miller.

Sunny Patel

Nikhil (Sunny) Patel, Sunny’s name fits him, particularly when you hear about his interests and passions. Sunny is originally from California and he moved here in 2011 to attend the Mayo Graduate School of Medicine. His awards and honors point to his commitment to caring, teaching, and serving— in medicine and in life— at home and around the world. His dedication to mentoring has played an important role throughout his education. Patel’s published research is expansive, and covers topics from heart disease to pediatric bipolar disorder. His articles reveal his dedication for the medical profession, and the role of the individual in today’s distressed world. He will continue to pursue his training at the Cambridge Health Alliance.

Keith Miller

Keith Miller will soon be starting as a resident in the Mayo psychiatry residency program. Although his academic awards and contributions to academic endeavors and institutions as a teaching assistant, admissions committee member, and conference co-coordinator are stellar, it is Miller’s depth and breadth of community service that draws attention. His service as a mentor and volunteer has benefited preschoolers through high-school aged youth, offering support for everything from hot meals to exposure to medical, scientific, and academic pursuits— often with a twist. His integration of superheroes and comic book do-gooders reminds us of the potential impact his outreach to the youth he serves could have. This psychiatric community looks forward to the day when he will join our ranks.

MPS congratulates our 2016 Gloria Segal Medical Student Scholarship Award winners! ☀

Gloria Segal Medical Student Award Winners

Since 1997, the Gloria Segal Medical Student Award has contributed to the careers of our honorees and helped to ensure that the ranks of Minnesota psychiatry include our best and brightest. The fund began with a gift from the Gloria Segal Family, and continues to this day through the generosity of donors.

Like many other funds relying on donations and interest to continue, the Gloria Segal Fund is facing hard times. Our net balance has waned since 2008 and we have had to reach out to MPS for help. Since that model is not sustainable, the Gloria Segal Scholarship Award Fund Chair, Maurice Dysken, MD, is now working with the Minnesota Mental Health Community Foundation (MMHCF) on a fundraising campaign. MMHCF is the foundation started by MPS to support efforts beyond the MPS mission but important to MPS members and their patients—projects that benefit the psychiatric and mental health community in Minnesota. The MMHCF mission is to support and promote access outreach and education about mental health treatment and systems of care. MPS is delighted to partner on this important endeavor, which certainly supports the MMHCF mission to improve Minnesota’s mental health care through education, advocacy and sound psychiatric practice, and support the vision of psychiatric leadership creating the nation’s highest quality, most affordable, and accessible system of mental health care.

MPS and MMHCF medical school leadership, are inviting you to join us as donors and supporters of the Gloria Segal Fund. Together, we can support and encourage the future of psychiatry in Minnesota. You can start today. Look for the MMHCF insert in this issue and mail in your donation right away! You can also go to the MPS website, click on the “More...” tab, then choose “Foundation” and go from there!

There is another way you can help. After 25 years, Dr. Dysken is stepping down from his role as the chair of the Gloria Segal Scholarship Awards Fund, and is looking for someone to work with for the next year who will take the reigns in mid 2017 for the 2018 giving cycle. Will you consider the role? Dr. Dysken is now working with the Mayo Graduate School of Medicine, Mayo and the U of M, to remind them of the criteria by which they will determine an award winner from each school. Then Dr. Dysken arranges for lunch with the winner, MPS president, and himself. Dr. Dysken shares CVs and photos (provided by award winners) with MPS to include in the newsletter and to prepare awards and presentation scripts. Then, all that is left is introducing the award winners and presenting their awards at the annual recognition dinner. Please contact Dr. Dysken or the MPS office to volunteer.

Thank you for your support — the future of Minnesota psychiatry thanks you! ☀

Ideas of Reference

Dysken, M.D., and the 2016 Distinguished Service Award which acknowledges the work with the Gloria Segal fund.
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NAMI MN Update

Carrie Borchardt, MD

In 2013-2014, while I was serving as your president of MPS, I started to think about what my next gig would be after completing that role. As many of you know, I very much enjoyed my three years as president-elect through past president. It was inspiring and energizing. I believed I was doing good work. I could also see the need for continued advocacy for our profession and our patients. It was through my work as president of MPS that I became better acquainted with Sue Auberholden, executive director of NAMI MN. It quickly became clear to me that she is a powerful advocate for mental health in our state, and that Sue and NAMI represent important voices at the Capitol for the needs of those with mental illness.

I joined the Board of Directors for NAMI MN in January 2015. My goal in doing so was to bring my experience as a child psychiatrist to the work of NAMI, and to be a bridge for collaboration between MPS, MSCAP, and NAMI MN. NAMI is the most important family advocacy organization for mental illness in our country. It was founded 40 years ago by families, in collaboration with APA. There is a long history of relationship and collaboration between these two organizations. Ironically, I found that my own history of mental health treatment and my struggles with my family members disabled by mental illness made me a really good fit for my NAMI work and for my bridging role with MPS and MSCAP.

I have not been disappointed by my investment with NAMI. In 2015, NAMI MN collaborated with MPS and other regional health and mental health organizations to obtain the largest increase in state spending ever received for treatment and supportive services for patients who have mental illness. In an annual report, NAMI national held up NAMI MN as an example of a state that has been especially successful. MN was one of only 11 states that increased investment in mental health care every year from 2013 to 2015.

We just completed the 2016 legislative session. We had many successes this session. Foster care parents will be required to have training in fetal alcohol spectrum. School-linked mental health grants were increased. As a child psychiatrist, I have many families report benefit from these clinics within the schools. The therapists can work more closely with teachers, and parents do not have to take off work to get their kids to therapy. Prisoners will no longer be charged copayments in order to get mental health treatment while in prison. NAMI has advocated strongly for increased state support of training, including psychiatry residency slots. They actively supported MMA's Prior Authorization Bill, which unfortunately did not pass.

Sue Auberholden responds quickly and skillfully to legislative issues as they come up. Recently, she became aware of a national bill that would have threatened the funding source of hundreds of our child residential treatment beds in MN. It could have been devastating for those programs. She quickly sprung to action and spent hours contacting state and national legislators and other mental health organizations. She was able to get the intent of the wording clarified in the record to save the funding for our programs.

These are examples of how NAMI's work benefits all of us. However, the greater work of NAMI MN is the extensive array of no cost family support materials, guidance, support groups, and family training.

I am writing this article for several purposes. I want to update you on the important work of NAMI MN. I am hoping that you will tell the families you care for about the support NAMI offers them. I have heard many families say that NAMI saved their family. NAMI is a great partner for the treatment work that you do. I want to make you aware of some of the legislative work of NAMI. Finally, I want to ask you to consider supporting NAMI financially.

NAMI MN is supported by donations and grants. As a board member, I can attest to the wise financial stewardship of this organization. MPS has a team for the NAMI Walk. I encourage you to donate online to Minnesota NAMI Walk, and we would love it if you would do that through our team. Be sure to donate or join through MN NAMI. Money sent to national NAMI does not come to MN.

Thank you for reading this and for any support you give us.

Carrie Borchardt, MD
We’ve got you covered.

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In Memoriam
Gabe J. Maletta, MD
Jim Jordan, MD

Gabe Maletta was a proud Italian from Paterson, New Jersey, where William Carlos Williams, the physician-poet, practiced. He left the East Coast and traveled to Berkeley, California, to earn a PhD in physiology. There he was mentored by a woman with an interest in rat brains who bonded with him over their shared Italian heritage and set him on his path. He attended medical school at Case Western Reserve in Cleveland, Ohio, and his interest in neurology and the physiology of the brain led him to a career in geriatric psychiatry. He was the author of numerous books and articles on topics associated with the neurochemistry of the aging brain. For almost four decades, he worked at VA Medical Center Minneapolis and as a clinical professor at the University of Minnesota Medical School, focusing his attention on the diagnosis and treatment—drug and non-drug—of neuropsychiatric illness of the elderly, including behavioral and psychological symptoms in dementia patients, the pharmacologic uniqueness of the elderly, and the care of chronic caregivers.

I met Gabe when we worked together as consultants at Blue Cross. My job was to orient him to the ins and outs of doing medical necessity reviews for the insurance industry. He was a quick study so we talked about the job of adjusting from doing direct patient care to this new role of reviewer, including the ethics of balancing patient needs with insurance policies. Our conversations over time said volumes about his sensitivity to patients and the wisdom he was bringing to the job.

In early 2016, Gabe was diagnosed with two kinds of liver cancer, and after a few very hard months he died this spring. His funeral was a wonderful celebration of a cherished husband and father, a much respected psychiatrist, and a well loved friend. That Gabe was a warm, approachable, and down-to-earth person is clear from the “Everything we need to know we learned from dad” list printed on the back of his memorial card:

- Tell the truth, keep your promises, and say you’re sorry.
- A parent’s love for his/her children is eternal.
- It’s OK to cry and to kiss your father.
- Mom doesn’t need to know everything.
- If you fail, try harder next time.
- Remember the poor people, and be thankful for your good fortune.

This lovely man and colleague of ours surely has left his mark on our community. I had my fortunate but brief encounter with Gabe and that will stay with me.

Nominees Sought!
The MPS Nominating Committee, chaired by MPS Past President Lloyd Wells, MD, is seeking suggestions and volunteers for the 2017 slate of nominees. Please contact MPS to volunteer to serve or to offer suggestions for nominees. Whether you are a resident, a fellow, an early career member, or a general member, you will be considered. Thank you for your membership and for considering contributing your time and talents to MPS service!
Congress Passes Comprehensive Addiction & Recovery Act

The American Psychiatric Association (APA) praised the Senate’s overwhelming vote on July 13th in support of comprehensive legislation addressing the national opioid crisis. The Comprehensive Addiction and Recovery Act, S.524, was overwhelmingly approved by the House last week. The measure now goes to President Obama for his anticipated approval.

“We are encouraged by the bipartisan support for this legislation—it encompasses many critical first steps toward fighting the nationwide opioid use epidemic,” said APA CEO and Medical Director Saul Levin, MD, MPA. “But we cannot stop here. These programs must be fully funded to be effective. APA looks forward to continuing to work with Congress to curb this epidemic.”

Nearly 2.5 million people in the U.S. have a substance use disorder involving heroin or prescription pain relievers, and more than 26,000 overdose deaths in 2014 were related to heroin or prescription pain relievers.

The Comprehensive Addiction and Recovery Act includes a range of measures to address the growing addiction problem, and among them are:

- Provides grants to expand access to life-saving opioid overdose reversal drugs (such as naloxone) and to expand access to addiction treatment services, including evidence-based medication-assisted treatment.
- Provides grants to community organizations to develop and enhance recovery services and build connections with other recovery support systems.
- Provides grants to states to carry out comprehensive opioid abuse response, including education, treatment, and recovery efforts, prescription drug monitoring programs, and efforts to prevent overdose deaths.

Opportunities at Fairview Health Services

Named One of America’s Best Employers by Forbes

Fairview Health Services and University of Minnesota Medical Center are seeking board certified/ board eligible Psychiatrists for a variety of practice opportunities throughout the Twin Cities.

Positions include:

- General Adult Inpatient Psychiatry, University of Minnesota Medical Center, Minneapolis
- Psychiatry Consult Liaison Service, University of Minnesota Medical Center, Minneapolis
- Psychiatry, University of Minnesota Medical Center, Minneapolis
- Collaborative Care Psychiatry, Outpatient, Elk River, MN (40 mins NW of Minneapolis)
- Child/Adolescent Psychiatry, Outpatient, Elk River, MN (40 mins NW of Minneapolis)
- Child/Adolescent Psychiatry, University of Minnesota Masonic Children's Hospital, Minneapolis

As a part of the Fairview Health Services system—one of the largest providers of behavioral health services in the Upper Midwest—psychiatrists have access to consultation, collaborative management or referral with University of Minnesota Department of Psychiatry, University of Minnesota Physicians and Behavioral Healthcare Providers. In addition, these positions have an established referral base of Fairview employed primary care and subspecialty physicians.

Psychiatrists employed with Fairview enjoy:

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To learn more, visit fairview.org/psychiatrists, call 800-842-6469 or email recruit@fairview.org. EEO/AA Employer
DHS Appoints New Assistant Commissioner

DHS recently appointed Claire E. Wilson as the new assistant commissioner to the Community Supports Administration. This division of DHS develops statewide policy direction for mental health, disability services, alcohol and drug abuse, housing and support services, and deaf and hard of hearing services.

Most recently, Ms. Wilson served as the executive director of the Minnesota Association of Community Mental Health Programs (MACMHP) and has been an ongoing advocate for the mental health and substance use disorders communities. MPS looks forward to working with her in this new position.