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Ideas of Reference
is the newsletter of the Minnesota Psychiatric Society, a district branch of the American Psychiatric Association.



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"Reclaiming Our Joy and Wonder as Healers"

MPS Spring Scientific Program & 2018 Recognition Dinner

Saturday, April 28, 2018 - Charleston Event Center, White Bear Lake, MN

The Minnesota Psychiatric Society's Spring Program is addressing a familiar topic in a new way. On April 28, we will approach the widely-discussed issue of physician burnout from a different perspective – empowerment. In addition to inspiring participants to invest in their own wellbeing, this program will showcase programs and resources in place



Corey Martin, MD

to help. Breakout sessions will be offered, providing something for everyone. The theme will focus on empowering each individual to address stress proactively using methods and tools that help each person reclaim their joy and wonder

as healers. Read more from our Planning Committee Chair Mary Beth Ladizabal, DO, on page 2.

The morning keynote speaker is Corey Martin, MD, a leader in this movement, and the founder of the Bounce Back Project. Dr. Martin will present, "A Return to Joy," kicking off the day-long scientific program.

Scott Oakman, MD, residency director of the Hennepin-Regions Psychiatry Residency Training Program, will speak to the psychiatrist perspective in his talk, "Focusing on Awe and Wonder." The morning will wrap up with Rahul Koranne, MD, MBA, FACP, presenting findings from the Minnesota Hospital Association and inviting psychiatrists to a deeper dive with, "Statewide Action Framework to Reduce Burnout."

We will cap off the afternoon sessions with a summary discussion and action steps to support Minnesota's community of psychiatrists to engage in action to personally reclaim joy and wonder as healers.

The evening is a celebration of psychiatry. Please join us for fun, camaraderie, and festivity! APA President Elect Altha Stewart, MD, will join us as our keynoter for a program that highlights our amazing members and community partners. Don't miss it! ■



Altha Stewart, MD

MPS Legislative Update

Dominic Sposeto, MPS Lobbyist

The state legislature returns from its Easter recess in early April and heads into the last six weeks of the legislative session. Major policy committees have completed their work for the year. Legislative committees now will turn their attention to the state funding and tax bills for the next two weeks after which time most legislative activity will occur on the floors of the House and Senate. A couple of MPS priorities are advancing.

Step Therapy: A proposal to reform medication step therapy sponsored by a broad coalition of providers (including MPS) and disease groups has been passed by both House and Senate policy committees. The bill was amended through negotiations between the coalition members and health plan opponents. It now has a good chance of passing this year.

The bill sets up a process for regulating step therapy requirements. Health plans will be required to establish a step therapy protocol after considering recognized evidence-based and

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Ideas of Reference

The newsletter of the Minnesota Psychiatric Society is published bi-monthly: Jan-Feb, Mar-April, May-June, July-Aug, Sept-Oct and Nov-Dec for members of MPS and others on request. Signed articles express the opinion of the author and do not necessarily reflect policies of MPS. Articles submitted are subject to review by the editors.

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Guest Editor

Mary Beth Lardizabal, DO

Spring Scientific Meeting

The topic of our spring scientific meeting is a timely one. With the changing landscape of healthcare, our practice as physicians continues to change. The environments in which we work change as well. In my own 22 years of practicing psychiatry, the changes seem to be coming faster and faster.

We can be so focused on quality metrics, payor reimbursement, and the electronic medical record that we lose sight of ourselves, our unique profession, and our relationships with patients. I have an intense interest in this topic because the learnings have been healing for me and it helps me to heal my patients.

This symposium will be about "burnout" and the current research surrounding it. But more importantly we will have a much needed dialog about the journey back to meaning and purpose in our physician lives. Dr. Corey Martin will tell his story about how he returned to Joy. We will learn about how to get help for ourselves or our colleagues around the issue of addiction.

Congratulations, MPS Life Members!

Please share your accomplishments and recognitions with MPS. Email Linda Vukelich (L.Vukelich@comcast.net) today.

The following MPS Members have attained Life Distinguished Fellowship:

- Susan Jenkins, MD, DLFAPA
Eric Larson, MD, DLFAPA
Peter Miller, MD, DLFAPA
Teresa Rummans, MD, DLFAPA

The following MPS Members have attained Life Membership:

- Thomas Keul, MD
Mark Koller, MD
William Meller, MD
Silvia Romero, MD

Congratulations! ■



Our Voices, Ourselves

Paul Goering, MD, DFAPA
MPS President

I cannot believe that my year as MPS president has almost passed already. It gives me pause and causes me to reflect.

Throughout the year you have heard me return to the theme I initially imagined, helping MPS continue to develop a strong, resonant, and responsive voice in the community at a moment in history when it seemed most needed. I am so grateful for the experience, and a quite frankly amazed at the work MPS has accomplished this year. And, while I could enumerate those achievements, I would like to call out the one that strikes me most strongly, the work of strategic planning. In my view, it is the single most important tool in converting our intent and capacity to action. Doing so would, without doubt, allow us to serve our patients and communities as we hope. What could be more important?

Having said that, I think that there is something as important: who we are to ourselves. At this time in my term, I ponder that view a lot. Who are we to each other in our work, in our relationships and in our community?

One of the final steps of strategic planning was to develop the implementation plans for each of the numerous and important committees we have. This exercise was really an inventory of where our members put their discretionary energy (as Chairs and Members) as they try to advance the priorities of MPS. What is more precious these days than our time and energy? It was a strong reminder that, as we set out to better serve our communities and patients, we can only get there by being sure each Committee is staffed by talented folks and focused on the most meaningful work. We have an obligation to one another to ensure that every moment spent is a moment adding value as we share in this work.

On a personal level, I came to this role with a distinct history and point of view. It was very similar to some MPS members, and could not have been further from others. Yet, every single interaction I had with leaders and general members alike was so generous in relationship. Our members have been accepting, supporting and willing to share the knowledge and experience they have. Moreover, they have been willing to be courageous in sharing information and views that have not always been popular, but were important to hear. What more could one ask for in relationship?

But perhaps the most impactful thing I recognized was how we offer each other community. Few are the places where a

group can be grounded so deeply in what they have in common, and how that serves us in the community we create. Admittedly, our work can be lonely. The different environments in which we practice our craft are almost infinite. And there has never been a time when everyone has been so busy. These issues sometimes conspire against us in coming together: when it's the the end of a bad day, at the end of a busy week, it's hard to say "yes, driving in to be part of an MPS function is exactly what I need." Yet, for me, being in a community with all of you was exactly the antidote I needed, even though I did not initially know it.

I am grateful for the opportunity to have served you. More, I am honored to share in work, relationship and community with you and look forward to what we next do together. ■

Virtual Advocacy Training - You have a second chance!

On March 14, the MPS presented virtual advocacy training for members who could not take time away from practice, but wanted to learn how to be a voice for psychiatry and their patients.

Participants joined via tele-video connections from the Twin Cities, Rochester, and Brainerd. The training covered: contacting legislators at the capitol, in district, and virtually; hot-topic issues affecting psychiatry; coalition building and grassroots advocacy. Participants gained skills and tools to advocate for patients and psychiatry.

The good news is that the training was recorded, and is now available on the MPS website. It covers Advocacy 101, and finishes with a review of the 2018 Legislative Priorities. For an update on where those priorities stand, please see Dominic's article on page 1.

There is still time to speak up for your patients and your profession. Each voice can impact your practice and our patients' wellbeing! Together, we can be a force. ■





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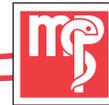
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Dr. Rana Elmaghraby Elected to APA Board of Trustees

I feel so honored and excited to be elected as the American Psychiatric Association (APA) Resident-Fellow Member Trustee (RFMT). I have been involved with the APA since I was a medical student and I have always been interested in legislation and policy issues, because this is where big change

happens. I chose to run for this position because I was keen to advocate for mental health on a state and national level. In addition, the Midwest has been underrepresented in these events and I want to actively share our efforts on a national level and bring back change to our region. My goal is to serve as the voice of resident and fellow psychiatrists, particularly in the realm of trainee wellbeing and serve as an advocate for people living with mental illness. These are my priorities for my term:

- Excellence in psychiatric patient care
- Strength through diversity
- Advocating for trainee wellbeing
- Enacting the voice of psychiatry residents and fellows.

What are the responsibilities of the American Psychiatric Resident Fellow Member Trustee (RFMT) position?

This is a two-year position in which a resident member serves as an American Psychiatric Association Board Trustee. In the second year of this elected position, the RFMT is a voting member. The APA Board of Trustees discusses relevant matters pertaining to mental health, ranging from healthcare reforms to physician wellbeing. The RFMT attends all board meetings, participates in matters at hand, including formulation and implementation of the APA policies.

Why do you think it's important that a position like the Resident Fellow Member position exists on the APA board?

Residents and fellows are the future decision makers and leaders of this field. I think it is crucial to facilitate early involvement and participation in all matters impacting our field of medicine and those we serve. In addition, residents and fellows present a unique perspective, from a trainee point of view, that can be incorporated to further advance medical training and education. ■



Growing Psychiatric Specialty Health System Seeks Psychiatrists

PrairieCare, a physician-owned psychiatric healthcare system in the Minneapolis/St. Paul metropolitan area, is recruiting child, adolescent and adult psychiatrists for its Brooklyn Park, Chaska, Edina, Maple Grove, Maplewood and Rochester sites. Child/Adolescent clinical duties may include treating youth in inpatient, partial hospital, intensive outpatient, residential and clinic settings. Adult patients are served in intensive outpatient programs and busy outpatient clinics with therapist, social work and nursing support on site. Academic appointment on the faculty of the University of Minnesota Medical School possible for interested candidates. Reports to Chief Medical Officer. Requires BC/BE in Psychiatry and unrestricted license to practice medicine in Minnesota.

With multiple sites across Minnesota, PrairieCare is rapidly growing and boasts one of the region's largest groups of psychiatric physicians. Our organization is focused on offering dedicated clinicians the opportunity to practice high quality psychiatric care in a supportive, team-based group practice.

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Ask your patients, "Do you find yourself eating quickly, in secret, or beyond a sense of fullness?" and "While you are overeating do you feel you've lost control and can't stop?" Simple questions can help you determine whether your patient may have Binge Eating Disorder.



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Legislative Update *(continued from page 1)*

peer-reviewed clinical practice guidelines. Each health plan must have a clear, readily accessible and convenient process for overrides of step therapy. These requests of step therapy must be able to be submitted electronically.

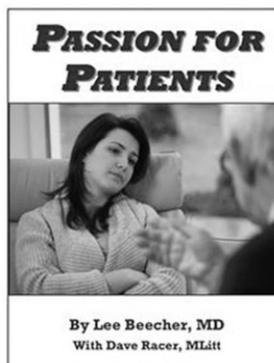
Overrides would be granted if the suggested drug may cause an adverse reaction, decrease the ability of the patient to maintain reasonable function, or cause physical or mental harm to the patient. Overrides would include a drug under the step therapy protocol that is contraindicated pursuant to the manufacturer's information or, due to documented adverse reaction with previous use or, a medical condition, including a co-morbid conditions.

Step therapy could also be waived when a patient changes his or her health plan but has a positive therapeutic outcome on a prescribed drug. A patient or their provider may appeal the denial of an override and the health plan must respond within five days, or within 72 hours for an emergency.

Mental Health Parity: A bill brought forth by the Mental Health Legislative Network (which includes MPS) to increase enforcement of mental health parity in the state has received attention at the Capitol. However, in order to improve chances of passage this year, the bill has been changed to a study of the issues surrounding parity and would require a report to the legislature next year. This will set up a more focused discussion of the issue in 2019.

Opioid Abuse: Several opioid related proposals have been

(Continued on Page 8)



A 2017 book *Passion for Patients* (written with Dave Racer) tells the story of Dr. Lee Beecher's 42 year independent psychiatric practice and long-standing mental health APA and community advocacy. Go to LeeBeecher.com for book reviews, Chapter summaries, policy recommendations for future patient-centered care, and to buy the book.



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Legislative Update *(continued from page 7)*

introduced and several are still pending. A bill to limit opioid pain medication to a seven-day supply is progressing. MPS has supported this proposal. Another bill would require two hours of continuing education related to best practices in prescribing opioids. It would apply to all physicians, nurses, and dentists with authority to prescribe controlled substances.

Another major proposal referred to as the "penny per pill" bill has run into considerable opposition and appears to be dead at least in the House. The bill would fund expanded treatment options and provide resources to first-responders to purchase naloxone. It would as proposed grants for education, and training for drug dispensers, health care providers and law enforcement relating to prescription of controlled substances, and drug deactivation and disposal. There appears to be ongoing support for these programs and it is likely that they may receive general revenue funding instead of the tax on pharmaceutical companies. Unfortunately, this would require these opioid grants to compete with other major requests for health and human services appropriations.

Pharmacist prescribing: A rather controversial proposal has been introduced to allow pharmacists to prescribe tobacco cessation medications, opiate antagonists, and travel medications. It is sponsored by the Board of Pharmacy and tobacco cessation proponents including Clear Way Minnesota, a non-profit established in 1998 through the state's tobacco settlement funds to assist Minnesotans to quit smoking. MPS was concerned that the proposal was a bit too broad and was able to have bupropion exempted under smoke cessation medications. The bill requires the Board of Medical Practice and professional physician, nursing and pharmacy associations to work with the Board of Pharmacy to develop standardized protocols that pharmacists must follow in order to prescribe these limited medications.

Psychology Prescribing: There have been no bills introduced allowing psychologists to prescribe medications. ■

Saturday, April 28, 2018, 8 am - 5 pm
MPS Spring Scientific Meeting Charleston Event Ctr
www.MnPsychSoc.org, 651-407-1873

Saturday, April 28, 2018, 5 pm - 9 pm
MPS Recognition Dinner Charleston Event Center
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Sunday, May 6, 2018 following the APA Annual Meeting Opening Session
Minnesota Get-Together at the APA in NYC
Call MPS for details - 651-407-1873

Saturday, May 12, 2018, 9 am - 12 pm
MPS Council Meeting (*members welcome!*) PrairieCare Institute, 1934 Hennepin Ave, Ste 300, Minneapolis, MN
www.MnPsychSoc.org, 651-407-1873

For calendar updates, go to www.mnpsychsoc.org

Saturday, April 28, 2018

**MPS SPRING SCIENTIFIC SESSION
ANNUAL RECOGNITION DINNER**

**Reclaiming Our Joy and
Wonder as Healers**

**Charleston Event Center
White Bear Lake, MN**

**Keynote Presenters
Bounce Back Project Founder Corey Martin, MD
APA President-Elect Altha Stewart, MD**