MPS 2018 Legislative Wrap-up

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MPS Lobbyist

The 2018 legislative session ended May 20 with little fanfare and even less accomplishment. The Republican-led legislature and the Governor once again failed to reach compromise, an unfortunately dirty word in the current political climate. The vetoes by the Governor of the supplemental budget bill and an important tax conformity bill will be the legacy of this year's unproductive session.

The failure to pass a small but important supplemental budget bill was a blow to physicians, mental health advocates and numerous other groups seeking important legislation. The nearly 1000-page bill appropriated a modest $131 million but contained numerous policy provisions that were the main issues of the legislative session. Several were of import to MPS.

**Mental Health Parity:** A proposal from the Mental Health Legislative Network, to which MPS belongs, calling for increased enforcement of the state's mental health parity laws was debated early in the session. The controversy over this legislation led to a proposal to create of a mental health parity task force which included both advocates and health plans. The task force was directed to study issues relating to enforcement of parity laws and report back to the legislature on specific recommendations to improve parity enforcement in the state. Given the climate at the capitol, this was considered a good first step in addressing mental health parity, but this task force will not occur due to the bill's veto.

**Opioid Abuse:** One of the legislature's top priorities, addressing the need for state funding for education, prevention, and treatment of opioid abuse fell prey to a strong lobbying effort from the pharmaceutical industry. The industry was able to turn back both a proposal for a "penny a pill" assessment on prescribed pain medications and a registration fee on drug manufacturers and distributors.

Additional opioid policy provisions were debated including a limitation on pain prescriptions to a seven-day supply, mandatory usage of the state's prescription monitoring program (PMP), a $50 registration fee for electronic access to the PMP, and two hours of mandatory continuing education on opioid abuse for all health care professionals who prescribe these medications. Some of these proposals failed to make the cut but a couple were added to the budget bill along with several million dollars for opioid treatment. They all died under the governor's veto. Hence, addressing the state's opioid crisis will have to wait until next year.

**Step Therapy:** There was one victory for mental health advocates this session. A proposal to reform medication step therapy sponsored by a broad coalition of providers (including MPS) and disease groups has been passed and signed into law by the governor. The bill sets up a process for overrides of step therapy.

Health plans will be required to establish a step therapy protocol after considering recognized evidence-based and peer-reviewed clinical practice guidelines and make their required process for overrides of step therapy both readily-accessible and convenient. These override requests must be able to be submitted electronically. The new law takes effect for health plan coverage issued or renewed after January 2019.

**Other Mental Health Funding:** The failure to pass the supplemental budget bill brought down several other mental health proposals including expansion of school based mental health grants, a suicide prevention hotline, and allowing primary care residency funding to expand from three to four years. Funding for these proposals will have to wait until 2019.

**Bonding:** The only other notable accomplishment of this year's session was the passage of a

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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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2018 Gloria Segal Award Winners

The Gloria Segal Award is given to the graduating senior from Minnesota’s two medical schools who has most exemplified excellence in psychiatry. This year’s awardees were recognized at the MPS Spring Meeting on April 28th.

The awardee from the University of Minnesota Medical School is Dr. Josie Skala. Josie received her BA in chemistry from the University of Minnesota Morris, where she was a scholar of the college. She has been active as a board member of the Student National Medical Association and in the Association of American Indian Physicians. She has worked as an EMT and in providing care for developmentally disabled adults. She has extensive volunteer experience, including work in a children's home in Nepal, on a local child and adolescent psychiatry unit, and in promoting physical activity and healthy body image in girls. Her research includes published work on pain before and after surgery in syringomyelia and Chiari I malformation, based on her participation in an NIH summer internship program. She will begin her residency in the University of Minnesota Psychiatry program this summer.

The awardee from the Mayo Clinic School of Medicine is Dr. Tanner Bommersbach. Tanner received his BA Summa Cum Laude in biology, with chemistry and psychology minors, from Concordia College in Moorhead, MN, and completed an MPH at Johns Hopkins University. He has been engaged in extensive volunteer work, including medical service work in Central and South America, working with teenagers coming out of foster care, and working with homeless adults attempting recovery from substance use disorders. He has been a teaching assistant and has worked on program development with community agencies. He has already published extensively on topics including substance use disorder and the epidemiology of suicide. He will be entering the psychiatry residency program at Yale University this summer, drawn by their emphasis on community and public psychiatry.
As I reflect on becoming our MPS President, I’m reminded of one ritual performed as part of my Bar Mitzvah. A Bar Mitzvah is a Jewish ritual where 13-year-olds study Jewish holy books, commentaries, learn to read and sing Hebrew from the Torah, lead a weekend service for their synagogue, and religiously take on adult status and responsibilities. In it, my grandfather picked up the Torah, handed it to my father, who in turn handed it to me, symbolizing the handing over of the repository of knowledge, wisdom, and responsibility, from each generation to the next (forgive the sexism involved – not my choice). This feels quite similar to Joel Oberstar teaching Paul Goering, who in turn has taught me, while all of us learn from and totally depend on tutelage, watchful eye, and ongoing efforts of Linda Vukelich and the MPS Council. Many thanks to all of you.

We start off this year in good position, having consensually finalized our strategic plan. We’ve engaged all of our committee chairs and asked them if their committee meets, what work they do, and is the work aligned with our bylaws, mission, vision, priorities, and strategic plan. As part of this process, some committee chairs suggested we abolish their committee or fold it into another committee. There was a suggestion to start a new committee—a senior committee, which Bill Clapp volunteered to chair. The remaining committees agreed to re-invigorate themselves and report regularly to our Council.

We have also reconfigured committees to reflect our discussions and new strategic plan. We are creating a new communications committee that can respond nimbly to meet media requests for experts, less urgent requests regarding psychiatric issues, and to work on using social media, in addition to the newsletter, to increase our profile and be one of the go-to places to request comment on psychiatric issues. We need your help as we fill out a new communications committee. One of the things this committee will develop is a list of members willing to quickly respond to media requests for expert opinions or reactions. This committee will also collect tools to aid members in this endeavor.

Our revised roster includes:

**Ethics Committee:** Chair Bill Clapp, MD, DLFAPA
Purpose: Helping people be conscious of medical identity and ethical behavior. Process and resolve ethics complaints charged against members according to procedures approved by the APA.

**Communications Committee:** Chair vacant
Purpose: MPS messaging development, media relations, web, communications, and newsletter production.

**Membership Committee:** Chair Eduardo Colon, MD
Purpose: Membership development & engagement, constituency group outreach/liaison, Distinguished Fellowship nominations and support.

**Nominating Committee:** Chair Paul Goering, MD, DFAPA
Purpose: Produce slate of nominees for election to open positions.

**Legislative Committee:** Chair Jonathan Uecker, MD
Purpose: Work with MPS lobbyist on advocacy, policy review, legislative priorities. Represent psychiatry at the Capitol, with regulatory agencies and state governmental officials. Work with PAC and Council on MPS priorities.

**Program Committee:** Chair Sheila Specker, MD, FAPA
Purpose: Develop educational programming strategy with fall/spring planning committee chairs.

**Women Psychiatrists:** Co-chairs Karen Dickson, MD, DLFAPA; Judith Kashtan, MD, DLFAPA
Purpose: Plan and provide quarterly brunches hosted by women members for socializing and mentorship.

**Constitution & Bylaws Committee:** Chair vacant
Purpose: Review MPS governing documents as needed to support the dynamic nature of the organization and uphold its nonprofit.

There are a number of MPS constituency groups offering opportunities to get involved too:

**Resident’s Caucus:** Open to all residents and fellows
Purpose: RFM reps work across programs with RFM members to develop programming and social opportunities for residents and fellows.

**MN Society of Child & Adolescent Psychiatry:** President Josh Stein, MD. Purpose: Events offer social, clinical, and policy forum for CAPs and others interested in child and adolescent psychiatry

**Senior Members Group:** Chair Bill Clapp, MD, DLFAPA
Purpose: TBD
MPS also has a Foundation and a PAC. All interested members are invited to participate.

While we were trying to connect with as many of you as possible for our strategic planning, several individuals were personally invited to come to our Council meeting (which is always open to all). They came and said they felt honored and emotionally warm that a colleague thought of them and
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2018 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!

Tanner Bommersbach

Tanner Bommersbach graduated from the Mayo Clinic School of Medicine in May – an important milestone on his educational path, previously marked with a BA from Concordia College in Moorhead, and an MPH from Johns Hopkins Bloomberg School of Public Health. His awards have punctuated his progress along the way as well, from Dean’s Lists and honors societies, to scholarships, and even a Helping Hands Grant from the American Psychiatric Foundation. Dr. Bommersbach’s accomplishments reveal a remarkable person who will truly be an asset to psychiatry.

The length, breadth, and depth of his bibliography would be an achievement for someone well into their career. He has already worked with many of Minnesota’s psychiatric leaders on topics covering public health, policy, ethics, pharmacology, suicidality, opioid use disorder, and alcohol use disorder.

Dr. Bommersbach’s CV lists numerous national and international presentations covering an equally broad array of topics presented to audiences of psychiatrists, addiction specialists, primary care providers, and public health professionals.

Upon graduation, Dr. Bommersbach will begin psychiatry residency training at the Yale. Congratulations!

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Psychiatry Residency & Fellowship Chiefs Meet

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.

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Gloria Segal Winners (continued from page 5)

Josie Skala

Our U of M Medical School 2018 Gloria Segal Scholarship winner is Josie Skala. Dr. Skala brings a distinctive history to her decision to pursue psychiatry. As an EMT, she saw people in crisis at their most vulnerable. As a group home worker she was honored to help residents live their best lives. As a psychiatrist she will be able to offer her patients care that can prevent crisis and hopefully encourage wellness with treatment to reduce symptoms and improve overall health. Dr. Skala’s research endeavors build on her biochemistry background. As a National Institutes of Health Summer Intern, she studied the effects of pain on disability. She has published and presented on much of her research related to a variety of topics.

As a volunteer, Josie attended to children and adolescents on a mental health unit, worked at health fairs, provided blood pressure screening, staffed tobacco cessation booths, and volunteered in a soup kitchen. She taught girls about healthier body images and self-esteem. Dr. Skala served on the Student National Medical Association where she also served as the historian and webmaster for the U of MN Twin Cities Chapter.

She is continuing on her path at the U of M Psychiatry Residency Training Program.

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.
Legislative Update (continued from page 1)

bonding bill which contained two meaningful mental health projects. Thirty million dollars in housing infrastructure bonds were granted for permanent supportive housing for persons with mental illness. Twenty-eight million dollars in bonding was granted for the construction of behavioral health crisis facilities throughout the state to provide mental health or substance abuse disorder services.

**Tax Conformity:** The veto of the tax conformity bill could mean a chaotic 2018 tax filing season. Minnesota state income taxes are now based on federal taxable income which will no longer include several deductions used by Minnesotans. Without a “conforming” tax bill, tax accountants and filers would have use revenue rules in place before the major tax law passed by Congress. If forced to use old rules, it is estimated about 300,000 Minnesotans would face increased 2019 state taxes.

This is the outcome that nearly all legislators and the governor vowed to avoid at the beginning of the session. There are discussions at the capitol regarding a special session after the November election to pass tax conformity or making this issue the first bill passed during the 2019 legislative session. Whether this occurs remains to be seen.

**Summary:** This is the 26th time in the last three decades that Minnesota state government has been divided. A house of one party and a senate of another, or a legislature of one party and a governor of another has been our norm. One would think that we should be getting good at governing under this scenario, but the fact is, it is getting worse.

Politics and elections are dominating state policy as elected officials continually feel the need to appease their base voters. This led to one of the most dysfunctional legislative sessions in my memory.

I have been a fan of divided government because I feel it gives the state the checks and balances we need to avoid going to far right or left. Now I wonder: what happens next? ■