



TREATMENT WORKS | RECOVERY IS POSSIBLE

the freudian slip

WWW.ALABAMAPSYCH.ORG

Join us for APPA's Spring Conference

The agenda for APPA's Spring Conference is almost set. The meeting will have 12 hours of instruction on topics including:

- ADHD
- Detection of Malingering in Psychiatric Patients
- End of Life Issues in Psychiatry
- Geriatric Psychiatry
- Post-discharge Suicides, Assaults and Murders
- Prion Disease: History, Film and Treatment
- The Psychosocial Dimension of Psychopharmacology
- The Role of Bupremorphine in Pain and Addiction
- Suicide Prediction and Prevention: A Practical Synthesis of the Evidence
- Value of Behavioral Health in Healthcare

Check APPA's website, www.alabamapsyc.org, for updates. 🌐

APPA Spring Conference Faculty

William Broughton, MD
Professor, USA College of Medicine

Severin Grenoble, MD
Medical Director, Horizon Health

Susan Lehmann, MD
Associate Professor, The Johns Hopkins University School of Medicine

Li Li, MD
Assistant Professor,
University of Alabama at Birmingham

Jesse C. Martinez, MD
Assistant Professor,
University of Alabama at Birmingham

David Mintz, MD
Staff Psychiatrist,
The Austen Riggs Center

Charles Rich, MD
Professor Emeritus,
University of South Alabama

John Santopietro, MD, FAPA
Chief Clinical Officer,
Carolinas HealthCare System

M. Jansen Voss, JD
Attorney with Scott, Sullivan,
Streetman & Fox, PC

David J. Williamson, MBA, PhD
Principle Medical Science Liaison,
Janssen Scientific Affairs, LLC

Registration is open!

APPA's
Spring
Conference

April 21-22, 2017

Renaissance Montgomery Hotel and Spa

Rate is \$135. Room Block expires March 22. [Reserve a room online](#)
or call (800) 468-3571.

Register online at www.tinyurl.com/APPA2017SpringConference.

WHAT'S UP AROUND THE STATE...

Birmingham



BIRMINGHAM PSYCHIATRIC SOCIETY



Join BPS on Feb. 21 at 6 p.m. for a meeting featuring Scott Weiner, MD. RSVP to [Bridget Cooper](mailto:Bridget.Cooper@otsuka.com) at Otsuka. For

more information, contact BPS President Paul O'Leary, MD at dr.paul@me.com.

Central Alabama

For More information about the Central Alabama Society, contact Linda Teel at (334) 288-9009 ext. 207 or linda.teel@mpa1040.com.




Mobile



For more information about the Mobile Bay Psychiatric Society, contact James Hart, DO, at

jimfh@icloud.com.

Tuscaloosa

If you live in the Tuscaloosa area and would like to get connected with your fellow colleagues, check out the Tuscaloosa Chapter of APPA. Contact Thaddeus Ulzen, MD, at tulzen@cchs.ua.edu for more information. 




Birmingham Psychiatric Society announces February meeting


Make plans to join your Birmingham colleagues on Feb. 21 for a meeting at Grand Bohemian. Scott Weiner, MD, will make a presentation on REXULTI. Make reservations by calling 205-792-7636 or e-mailing bridget.cooper@otsuka-us.com. Refer to meeting ID: ORT0063783. Contact BPS President Paul O'Leary, MD, at dr.paul@me.com for more information.

February 21, 2017, 6:00 p.m.

Grand Bohemian

2655 Lane Park Road, Mountain Brook 

APA/APAF seeks fellowship applicants

APA/APAF Fellowships allow residents and fellows to expand their skills and explore interests while completing their regular training program. Many come with funding for projects or research and provide an excellent opportunity to connect with colleagues from across the country. Applications are due Jan. 30, 2017. [Explore the fellowships today.](#) 


Blue Cross Blue Shield Health Index identifies top health issues

The BCBS Health Index measures the impact of more than 200 common diseases and conditions on overall health and wellness by assigning each county in the United States a health metric between 0 and 1, designating the proportion of optimal health reached by the county's population. For example, a measurement of .9 indicates that, on average, the population of a county is living at 90% of its optimal health. In other words, the county population could gain up to 10% in healthy lifespan by addressing the top health conditions impacting their area.

Top 5 national conditions

- Depression/Anxiety/Mood Disorders
- Hypertension
- Diabetes
- High Cholesterol
- Substance Use Disorders


Alabama

The top diseases in Alabama mirror those of the national list, though the order is slightly different. To see details for your county, visit the [BCBS Health Index](#) online. 

Medicaid Synchronization legislation to be considered in 2017

Marsi Thrash, APA Regional Field Director

Legislation is being introduced around the country to enable Medicaid beneficiaries to synchronize their medications so that they may order and receive them on the same day each month, instead of having to make multiple visits to the pharmacy. Proponents believe this will reduce medication waste, as well as the poor healthcare outcomes that result from decreased medication adherence.

So far, Mississippi is the only state in Area 5 where the legislation has been filed. It is receiving great support from every party except for insurance. 

ACA repeal would increase opioid treatment gap by more than 50%

New Harvard Medical School and New York University data analysis shows the devastating impact repeal of the Affordable Care Act would have on Americans suffering from the opioid epidemic, increasing the treatment gap by over 50% and draining at least \$5.5 billion a year from treatment for mental and substance use disorders.

OP-ED: To sustain progress on treating opioid disorders and serious mental illnesses keep the ACA

Richard G. Frank and Sherry A. Glied

In enacting the 21st Century Cures Act this past December, Congress took important steps toward promoting access to high quality care for mental and substance use disorders. The Act directs new resources to two long-standing challenges: federal opioid misuse and abuse (\$1 billion over 2 years) and serious mental illnesses (about \$200 million in 2017). These new appropriations, secured through a broad bipartisan vote, will fund critical investments in treatment capacity and quality.

But these investments will be squandered if the new Congress rolls back recent gains in the quality and level of substance use and mental health insurance coverage generated by the Affordable Care Act (ACA) of 2010. Building upon the Mental Health Parity and Addictions Equity Act, the ACA gives people suffering from these devastating illnesses the purchasing power that will allow them to use this new treatment capacity. Without the foundation of that ongoing financial support, those in the eye of the opioid storm and those who live in society's shadows due to serious mental illnesses will continue to die of untreated illness, and their communities will continue to pay for the jails, prisons and homeless shelters that serve as our de-facto service system for many with these conditions.

Repealing the ACA – and its behavioral health provisions – would have stark effects on those with behavioral health illnesses. We estimate that approximately 1,253,000 people with serious mental disorders and about 2.8 million Americans with a substance use disorder, of whom about 222,000 have an opioid disorder, would lose some or all of their insurance coverage. One impetus for passing the Cures Act was to address an opioid treatment gap of about 420,000 people that reported money or availability of care were key impediments to obtaining substance use treatment – repealing the ACA would increase that gap by over 50% with the stroke of a pen.

The impact of repealing ACA provisions related to mental and substance use disorders would have particularly adverse effects on states that have experienced some of the most tragic increases in opioid related deaths. Many of these States – including Alaska, Kentucky, Maine, Ohio, West Virginia – have seen their adult uninsured rates drop by more than 5 percentage points since the implementation of the ACA coverage expansions in 2014. Several – Kentucky, Massachusetts, Maryland, Ohio and West Virginia – have addressed the opioid overdose problem by promoting use of effective Medication Assisted Treatment (MAT) in the context of their Medicaid expansions. The result is that Medicaid pays for between 35% and 50% of all MAT in those states. They would find it much more challenging to maintain these evidence-based programs in the face of a repeal of those expansions.

To put this in dollar terms, repealing the mental and substance use disorder coverage provisions of the ACA would withdraw at least \$5.5 billion annually from the treatment of low income people with mental and substance use disorders. The Cures Act's two-year, \$1 billion increase in treatment capacity would not even serve as much of a bandage if it were coupled with a cut in annual treatment spending that is more than five times greater.

The Congress and the American people have come to realize that stemming the tragic toll of opioid misuse and addiction and serious mental illnesses takes funding as well as policy. The Cures Act reflects bipartisan agreement on this point. It would be a cruel sham for Congress to take an important, but modest, step forward in investing in treatment capacity, while withdrawing funds from the enormous recent progress made in addressing the needs for care of those with mental health and addictive illnesses.

Congress should not backtrack on the promise of the Cures Act by repealing the ACA. 🌐

APA urges Congress to keep mental health reforms

Saul Levin, MD, APA CEO and Medical Director

As Congress continues to move forward in addressing potential significant changes to the Affordable Care Act (ACA), I wanted to update you briefly on our work to date.

Since early December, the Department of Government Relations has engaged key Congressional offices to educate Members of Congress and their staff on what has been gained under the ACA for individuals with mental illness. This engagement has been non-partisan, objective, and data-driven with feedback from the congressional offices being appreciative of the analyses of the mental health sequelae of repeal.

Last week, Dr. Maria A. Oquendo and I sent a letter to Congressional leadership requesting that any changes to the ACA do not undo the gains which have been made over the past several years for individuals with mental illness. Such gains include enhanced access to evidence-based care from the expansion of coverage – both within private insurance and Medicaid, as well as the expansion of mental health parity to individuals covered under the ACA. The letter echoes the message we have been conveying to the Hill.

As you know, debates around the ACA remain ongoing, and the outlook for how Congress proceeds on this issue in the coming months remains unknown. Congressional Republicans have made it clear they want to repeal the ACA, but the exact timing of the repeal and any replacement plan remains uncertain. APA continues to remain engaged with the Hill and its allied stakeholders on this issue. We also sent a letter to Hill leadership with the American Society of Addiction Medicine, the American Academy of Addiction Psychiatry, and the American Osteopathic Association of Addiction Medicine to preserve access to mental health and substance use services. Our goal is to position ourselves strategically to maximize our influence on behalf of our members and the patients they treat.

We will keep you updated as the situation develops. If you have any further questions or would like help reaching out to your Member of Congress, please contact Ariel Gonzalez, Chief of Government Affairs, at agonzalez@psych.org. 🌐

SAVE *the* DATE

Coming Attractions

2017 APPA Spring Conference

April 21-22 | Montgomery Renaissance Hotel and Spa
Room reservation deadline is March 22. Call (800) 468-3571.

2017 APPA Fall Conference

October 28 | Ross Bridge Resort, Birmingham

2018 APPA Spring Conference

April 20-21 | Embassy Suites, Montgomery

2018 APPA Fall Conference

October 6 | Battle House, Mobile

2019 APPA Spring Conference

April 5-7 | Sandestin Golf and Beach Resort, Florida

Registration is open for APA's Annual Meeting: Prevention Through Partnerships

May 20-24, 2017, San Diego, Calif.

The field of psychiatry continues to change rapidly because of new science, technologies, systems of care, collaborations and partnerships. One important area of change for the field of psychiatry is the movement toward prevention and wellness, and impacting patient care through the development of partnerships. Early identification of potential signs and symptoms as well as early intervention can positively affect many cases related to preventing or minimizing the impact of mental illness. Partnerships with disciplines in medicine, paraprofessionals and community development sectors will be key to advancing the future of mental health.

Participating in this year's Annual Meeting will provide you with the knowledge and understanding to help you effectively practice in this rapidly changing environment, including the latest research, best practices, innovative approaches and more.

View meeting details [online](#). 


Call for Abstracts: APPA Spring Conference

APPA invites residents and fellows to submit poster presentations for display at the 2017 Spring Conference in Montgomery, April 21-22. Poster abstracts are peer reviewed and posted online, so they count as "Published Abstracts" on your curriculum vitae. This is an easy way to build your academic portfolio! **Plus, the top posters receive cash prizes.**

Send abstracts to Lengeriser@altapointe.org and he will forward them to the scientific committee for review. Please print your poster at a size of 24 by 36 inches so that they will fit on our presentation boards.

See sample abstracts in the [Members-in-Training](#) section of APPA's website. **The deadline to submit abstracts is March 24.**

Because of a grant from the American Psychiatric Association, residents and fellows may attend the spring conference for free! (Pre-registration is required.)

Find more information about the Spring Conference online at www.alabamapsych.org/residents. 

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Alabama Psychiatric Physicians Association

19 S. Jackson Street |
 Montgomery, AL 36104
 (334) 954-2500
 Fax (334) 269-5200
www.alabamapsych.org

Tarak Vasavada, MD,
 Publisher
 Jennifer Hayes,
 Executive Editor
 Charlotte H. Morris,
 Senior Editor

Articles or advertisements should be sent to Charlotte H. Morris, at cmorris@alamedical.org two weeks in advance of printing.

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