



Executive Council met in-person in April. Pictured from left to right: Elizabeth Monis, M.D.; Courtney Cosby, M.D.; Michael Zarzar, M.D.; Robin Huffman; Reem Utterback, M.D.; Therese Garrett, M.D.; Nadyah John, M.D.; Samina Aziz, M.B.B.S.; Jim Jensen, M.D.; Nate Copeland, M.D.; Steve Buie, M.D.

IN THIS ISSUE

President's Column
PAGE 3

Message From The Editors
PAGE 4

What Psychiatrists Need to
Know About: Negotiating
Reimbursement Rates
PAGE 5

Member Spotlight:
Steve Buie, M.D., D.L.F.A.P.A.
PAGE 6

Legislative Update
PAGE 9

REGISTER TODAY!

NCPA Annual Meeting &
Scientific Session

September 28 - October 1, 2023

Marriott Grande Dunes
Myrtle Beach, SC

Pre-Conference: September 28

[www.ncpsychiatry.org/
annual-meeting](http://www.ncpsychiatry.org/annual-meeting)



Annual Meeting & Pre-Conference

SEPT 28 - OCT 1, 2023

Marriott Grande Dunes Resort
Myrtle Beach, SC

THIS YEAR'S ANNUAL MEETING AND PRE-CONFERENCE CANNOT BE MISSED. BE SURE TO ATTEND!

The countdown is on – it's almost time for the NCPA's Annual Meeting and Scientific Session. If you haven't already done so, get out your calendar and mark September 28 - October 1 as "booked!" While you're at it, go ahead and register for the meeting and make your hotel reservations by using the QR code on page 10. You'll be glad you did because the 2023 Program Committee has confirmed a truly outstanding lineup of presenters and topics, including an extra day of CME with a Pre-Conference workshop on Thursday, September 28.

Plan to arrive the morning of September 28 to participate in the Workplace Safety: Empowering Physicians and Supporting Healthcare Professionals Pre-Conference. After the tragic death of June Onkundi, a nurse practitioner

who was stabbed to death in a Durham clinic last fall, NCPA vowed to work to promote safe work environments and support for our patients, colleagues, and frontline staff. Topics will include a practical violence risk assessment, countertransference and setting boundaries, de-escalation with hands-on practice, information on ways to keep your office safer, and more.

NCPA and the Psychiatric Foundation of North Carolina are proud to announce that Mary Carskadon, Ph.D. is the 2023 recipient of the V. Sagar Sethi, M.D., Mental Health Research Award and will be presenting her research at the Annual Meeting. Dr. Carskadon is a Professor in the Department of Psychiatry and Behavioral Science at the Warren Alpert Medical School of Brown University. She is best known for her

continued on page 10...

DON'T WEATHER THE STORM ALONE

VISIT THE NCPA DISASTER RESOURCE CENTER

www.ncpsychiatry.org/disaster-resource-center

As we near the beginning of hurricane season, NCPA's Disaster Committee reminds you that there are numerous resources at your fingertips.

NCPA's website has a Disaster Resource Center, created by the Disaster Committee. Psychiatrists provide valuable medical experience and expertise for preparing and responding to disasters and mass traumas.

These resources are designed to help you and your patients following a disaster, and are updated as needed.

Topics and Resources include:

- Helping children cope
- Mass trauma
- Packing an emergency kit
- Handling medical disruptions
- And links to APA, Red Cross, and the National Child Traumatic Stress Network

Scan the QR code with your phone to view the NCPA Disaster Resource Center today, or visit: www.ncpsychiatry.org/disaster-resource-center



SCAN ME



NORTH CAROLINA
Psychiatric
Association

news

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PRESIDENT'S COLUMN

WORKING TOGETHER TO IMPROVE PSYCHIATRIC CARE IN NORTH CAROLINA



Constance Olatidoye, M.D.
NCPA President

I extend warm greetings to each and every one of you as I step into the role of President of our esteemed association. It is an honor to serve in this capacity, and I am humbled by the trust you have placed in me. I want to take a moment to introduce myself and share my vision for the coming year, with a particular emphasis on some

pertinent healthcare issues facing both North Carolina and our nation as a whole and fostering collaboration across our diverse community of psychiatrists in North Carolina.

Having spent the majority of my career forming and operating a rural community behavioral health clinic, I have firsthand experience of the unique challenges and opportunities that exist in underserved areas. I have seen the incredible resilience and strength of individuals and communities in the face of limited resources and barriers to access.

As President, my foremost objective is to bridge gaps and enhance communication and collaboration among psychiatrists in North Carolina, regardless of their practice setting or background. I firmly believe that by coming together, sharing our experiences, and learning from one another, we can strengthen the collective impact of our profession. Whether you practice in urban centers, rural communities, academic institutions, or private clinics, your insights and expertise are in-

valuable in shaping the future of psychiatry. By fostering collaboration and inclusivity, we can achieve better outcomes for our patients and enhance the overall impact of our profession. Together, we will work to influence policy decisions to ensure that mental health services are equitable and accessible across our state.

I also encourage all members to actively engage in community outreach and advocacy efforts. By partnering with local organizations, community leaders, and policymakers, we can raise awareness about mental health, reduce stigma, and influence policy decisions that impact our patients and our profession. Together, let us work towards bridging gaps, fostering collaboration, and advancing equitable mental health care in North Carolina. I invite each of you to join me in this journey, as your voice and expertise are vital to our collective success.

In all our endeavors, I recognize the importance of promoting diversity, equity, and inclusion within our association. It is crucial that we create a space where all voices are heard and valued. I encourage members from underrepresented backgrounds to actively engage, contribute their unique perspectives, and assume leadership roles within our association. Together, we will foster an inclusive environment that reflects the rich diversity of our profession and the communities we serve.

Moreover, it is imperative that we address the disparities in mental healthcare that disproportionately affect marginalized populations, including people of color, low-income individuals, and the LGBTQ+ community. These disparities are not unique to North Carolina but reflect broader national challenges. As an association, we must lead the charge in advocating for policies that address the social determinants of mental health

continued on page 11...

CLASSIFIED AD

Private, outpatient group practice in Chapel Hill looking for psychiatrist to join us as a New Partner. Our long established, all psychiatrist practice is looking for another psychiatrist to replace a partner who is retiring after many years with our group. Beautiful, large office in a quiet building near I-40, partners to share coverage, referral of patients from retiring partner. Office is owned by group. Available now, with some flexibility of start time.

Interested in joining our prosperous group in Chapel Hill? Email us at smalldoctoroffice@gmail.com

NEW NCPA NEWS CO-EDITOR ANNOUNCED



**Danielle Lowe, M.D.,
Ph.D.**

NCPA News Co-Editor

Communication leads to community, that is, to understanding, intimacy and mutual valuing. Rollo May, Ph.D.

I am excited to introduce myself as co-editor for the newsletter with *Art Kelley, M.D., D.L.F.A.P.A.* I joined the NCPA after fast-tracking from the Medical University of South Carolina to the

child and adolescent psychiatry fellowship at UNC Chapel Hill. At the end of this academic year, I am joining the UNC child consult-liaison and ECT services as a clinical assistant professor. This will also conclude my time as Editor-in-Chief for the *American Journal of Psychiatry Residents' Journal (AJP-RJ)* and chair of the APA/APAF Child and Adolescent Psychiatry Fellowship.

The AJP-RJ guides trainees through the peer review and publication process with a trainee editorial board and reviewer pool. As editor, I worked with authors to

help clarify their understanding of the review process and develop their manuscripts for submission. It has been wonderful being part of a network of academically minded trainees and learning more about the academic journal editorial process.

For trainees looking to connect with peers across the nation and learn more about the national organization, I strongly recommend looking into the APA/APAF fellowships. Fellows connect with leaders within the APA, serve on an APA committee/counsel, and participate in individual mentorship. From commitment laws to compensation, community to military psychiatry, fellows bring a sense of understanding and mutuality to the group.

In a time where telework expands, yet also limits, our ability to network and collaborate, the NCPA newsletter has been a terrific resource to understand the state and development of psychiatry in North Carolina. I have been thankful for the efforts of the NCPA and look forward to bringing relevant updates for psychiatrists and trainees across the state. 🌱

A SENIOR PSYCHIATRIST READS NEUROSCIENCE



**Art Kelley, M.D.,
D.L.F.A.P.A.**

NCPA News Co-Editor

Kurtotic biomarkers, Cronbach's $\alpha=0.63$, images consisted of a high-resolution navigated multi-echo magnetization-prepared rapid acquisition gradient-echo sequence, low classification accuracy (AUPRC < 0.10), Welch's t test, applying FDR (*wasn't he a President?*) correction, the DIFFTEST procedure in Mplus, sgACC/NACC activation, AMPA receptors, Gamma oscillations

shaped by activity of pyramidal neurons and GABAergic parvalbumin-expression interneurons, gamma band power in schizophrenia, GM-CSF=granulocyte-macrophage colony stimulating factor, Cohen's d maps associated with the different RAP imaging t-maps,

Exome sequencing and variant calling, VCRome, spinogenesis, BDNF, TrkB, kalirin-7, dendroplastic reticulum, disrupted dorsal mid-Insula activation during interoception NOTCH 2 gene, k-nearest neighbor, Gaussian naïve Bayes, generalized fractional anisotropy (GFA) Z-score profiles of probands with ADHD, resting state connectivity within the cingulo-opercular network, see outline supplement (*doubt that this will help*), the revised ALE algorithm which compares the convergence of reported coordinates with those expected under random spatial association, neuro-oscillatory approaches, event-related potentials (ERPs) (*I thought ERP stood for Exposure and Response Prevention, oh well*), auditory oddball responses.

Lordy, Lordy!! Wonder if this was the way the Homo neanderthalensis felt when they met their first Homo sapiens? 🌱

What Psychiatrists Need to Know About...

Negotiating Rates

Did you know that you can renegotiate your contracts with insurance companies to increase your reimbursement rates? If you haven't done this lately (or ever), now is the time!

Each insurance company – and their terms – are different. A contract signed several years ago may have been under different circumstances than contracts being signed today. Try reaching out to each insurance panel to discuss changes to your contract to increase your reimbursement rate. This article will show you how.

WHY NEGOTIATE?

Historically the reimbursement rates for psychiatric physicians have been significantly lower than any other medical specialty. While antitrust laws prohibit physicians to engage in joint fee setting, NCPA is allowed to collect information related to rates our members are paid and compare those to external research of other medical specialties. In doing so, we have discovered that other physician specialties' commercial insurance reimbursement rates are significantly higher than the cost-based Medicare rates, while most psychiatrists' insurance reimbursement rates are currently more likely to be below Medicare.

Behavioral health services play a key role in improving patients' overall health. Research is showing the value of behavioral health care in reducing the costs of typical physical health care. But this value has not been reflected in current reimbursement rates and impacts. There is a growing awareness of the impact of mental illness on society and the health care delivery system. And the new requirements for insurance companies to have "network adequacy" (enough physicians, psychiatrists, and other clinicians to be able to care for the number of covered lives the insurer has) creates an opportunity for psychiatrists.

HOW TO NEGOTIATE

There is currently a shortage of psychiatrists willing to participate in insurance panels, so you may have le-

verage in negotiating. Phrases to keep in mind to use when negotiating rates are "network adequacy" and "rates at parity with other physicians" (while there is some debate, mental health parity regulations do include rate parity). Do not be afraid to negotiate! If you say "no" to the first offer and are unable to negotiate better terms, you can always accept the first offer at a later point.

Keep in mind, until a contract is signed, the terms are open to negotiation. Do not feel pressured to sign a contract for terms that are unsatisfactory.

WHO DO YOU CONTACT

The first step you should take is to contact the insurance plan's provider relations or contracting department to determine where to send a request to insurance your reimbursement rate. Most often these requests need to be completed in writing.

WHAT SHOULD YOUR REQUEST INCLUDE

In your request, you should state how long you have been paneled with the network, how long you have been practicing, and other data that will showcase your work. Perhaps it is the number of patients you have kept from hospitalization or that you serve a large number of their patients.

Describe yourself, what skills and experience you have and why you deserve a higher rate. What is your patient population? Are they underserved?

If you are doing measurement-based care for a particular diagnosis, such as depression, be sure to talk about your patients' outcomes. For example, for depression using the PHQ-9 you could report the number who achieved remission and the number who had at least a 50% improvement in their score.

You may need to request a specific fee you are requesting for each CPT code, or consider a percentage of Medicare, matching the rates of a competitor's panel, or even parity with Primary Care rates.

continued on page 11...

MEMBER SPOTLIGHT

STEVE BUIE, M.D., D.L.F.A.P.A.



**CHAIR, DEPARTMENT OF PSYCHIATRY AND MENTAL WELLNESS,
MOUNTAIN AREA HEALTH EDUCATION CENTER**

All professional associations rely on the volunteer services of their individual members. The North Carolina Psychiatric Association is no exception. Our Executive Director, Robin Huffman, and dedicated staff provide excellent guidance to all those members who volunteer their time and effort on the Executive Council and our committees to further the mission of NCPA. *Steve Buie, M.D., D.L.F.A.P.A.* is one of our most dedicated members. With this member profile, we celebrate his dedication.

Born in Lenoir, Dr. Buie has, except for a brief time out of state for residency, dedicated his career to the citizens of North Carolina. As a Morehead Scholar, he earned his undergraduate degree from the University of North Carolina at Chapel Hill. He always intended to go to medical school but while completing his premed requirements, he also earned a B.A. in Comparative Literature. He then received his medical degree from UNC-Chapel Hill and in his only education outside of North Carolina, he completed a residency in Internal Medicine at Columbia and a residency in psychiatry at Cornell. Then it was right back to western North Carolina to a position at Highland Hospital in Asheville. In 1994 he founded the Pisgah Institute for Psychotherapy and Education with two other psychiatrists and three psychologists. His practice included outpatient work and caring for inpatients at Mission St Joseph's and Park Ridge Hospitals. While continuing his private practice, in 2015 he became the Psychiatry Residency Training Director for the new residency at Mountain Area Health Education Center (MAHEC). He was appointed the Psychiatry Department Chair in 2019. With taking on these new academic duties he left private practice in 2020.

Dr. Buie's career has included three of the prominent areas of psychiatry: outpatient, inpatient and academic administration. Despite this very busy career he has found time to serve NCPA. He credits NCPA member *Jack Bonner, M.D., D.L.F.A.P.A.* a colleague at Highland Hospital, with instilling the idea of service to your professional association to advance the profession. And for Dr. Buie, involvement in his professional asso-

ciation also gave him a platform to advocate for the behavioral health needs of western North Carolina. Dr. Buie has served in multiple positions for NCPA since 1990 including: Chairman of the Annual Meeting Program, Secretary, Vice-President as well as President in 2009-2010. He also serves as President of the Psychiatric Foundation of North Carolina, the charitable arm of NCPA. But his longest term of service has been as a NCPA American Psychiatric Association Assembly Representative. He retires from that position this year after 12 years of service, the maximum length one can serve.

His role as Assembly Representative has been rewarding. Dr. Buie sees the Assembly as essential in its advisory role to the APA Board of Trustees. It is the voice of the general membership of APA on professional issues important to APA and NCPA members and their patients. Although its rules and regulations can be seen as arcane in their complexity, the Assembly has done important work during his tenure. He notes the Assembly played an important role as one of the review organizations during the development of the DSM-V. He credits the Assembly with helping to preserve the current structure of the Personality Disorder diagnoses when an overhaul it deemed unhelpful to clinicians was being considered. Secondly, he says the Assembly had a big role in modifying the original Maintenance of Certification (MOC) requirements to make them less onerous to clinicians while preserving its intent.

Dr. Buie encourages early career psychiatrists to become involved with NCPA. It helps one stay current and leads to career long relationships with colleagues that are one of the antidotes for burnout.

The American author, Tim Fargo, said "Leadership is service, not position." By this standard, Dr. Buie is a true leader in NCPA. Thank you, Steve. By the way, would you be willing to serve as..... 🌱

Member Spotlight is a new column, where we feature the outstanding work of NCPA members. If you are interested in nominating a member, email info@ncpsychiatry.org.

APA ANNUAL MEETING RECAP

The APA Annual Meeting is a great—and big—conference. Sometimes, trying to see a familiar face is like searching for a needle in a haystack! One event that has made the huge APA Annual Meeting more personal has been the North Carolina reception.

With help from *Moira Rynn, M.D.* and *James Rachal, M.D.*, a reception was organized for NCPA members and friends, hosted by many of the state’s residency training programs—Duke, UNC, MAHEC, Cape Fear Valley, Atrium Wake Forest Baptist—as well as other supporters—HopeWay and PRMS.

The warm glow of the Irish Bank pub was a perfect setting to catch up with colleagues, renew old friendships, and meet new friends!

Next year’s APA meeting will be in New York City, May 4-8. Perhaps we will see you there!!



MEMBERS WIN AWARDS



Several NCPA members received awards at the APA Annual Meeting. *Xiomara Nieves Alvarado, M.D.*, PGY-IV and *Christopher Ramsay, M.D.*, PGY-III both won at the APA Area V Poster Session. *Margie Sved, M.D., D.L.F.A.P.A.* is the 2023 recipient of the Barbara Gittings Award, presented to a woman who demonstrates exceptional leadership and advocacy for lesbian issues. Congratulations to everyone!

Start your new career in Asheville!

- Psychiatrist Faculty Physician (IDD Focus)
- Psychiatry Residency Program Associate Director
- Child and Adolescent Psychiatrist Faculty Physician



Our mission is to train excellent psychiatrists who can work with rural, underserved populations and who are experts at providing consultation in primary care settings. We are located on MAHEC’s Biltmore Campus and provide comprehensive psychiatric and behavioral health services for children, adolescents, and adults.



mahec.net/careers | AskTalent@mahec.net

EXECUTIVE COUNCIL BEGINS NEW TERM

In March, NCPA members returned their election ballots, voting overwhelmingly to approve the slate of officers proposed by the Nominating Committee. The newly-elected officers officially began their terms at the conclusion of the APA Annual Meeting in San Francisco, May 24. Congratulations and thanks to the incoming NCPA officers and new Executive Council members for 2023-2024!

Each year NCPA sends ballots and candidate information to all members for their review and anonymous return vote. From time to time, members ask about the nomination and voting processes. The NCPA Nominating Committee typically is comprised of two chairpersons and members who are representative of our membership and of each region of the state. (Our By-laws define our regions based on the historical four geographical areas traditionally served by the state's four original mental health hospitals.)

The Nominating Committee then selects at least one candidate for each position open, reports its slate to the Executive Council and then the full membership. Nominations may be received from the floor during the Business Meeting, held during the Annual Meeting and Scientific Session in the fall. Nominations may also be received by petition of 25 members within six weeks following the Annual Business Meeting.

While the Nominating Committee has an official purpose of developing the slate for the next year's election, it also serves to help identify and encourage members to engage with NCPA in its other work. Sometimes new faces for Executive Council leadership are identified by their work on NCPA committees and task forces. We encourage members from every part of the state to let the NCPA office know of their interest in serving on task forces, committees, or representing your geographic region of the state on Executive Council.

The Tellers Committee is responsible for establishing an equitable voting system. Voting is done by secret ballot, and all slated officers must receive a majority of votes cast to be elected; there are procedures in place to address run-offs and reruns as well. NCPA's fiscal and operational calendar runs from May to April; officers on the slate typically are voted on during the months of January, February and March, depending on when the ballot information is mailed to members. The new officers and Executive Council members begin their official work at the first Executive Council meeting of the new governance year, typically in June. The detailed processes and procedures can be found in the Constitution and Bylaws.

For more information about NCPA's Constitution and Bylaws and a full list of Executive Council members, visit the "About Us" menu at www.ncpsychiatry.org. Further, members with questions about the election process or interest in becoming more active in NCPA should contact staff for more information, info@ncpsychiatry.org or 919-859-3370.

If you are interested in serving on a task force, committee, or Executive Council, please reach out to the NCPA Office. We want to hear from you!

MEET *the* NEWLY ELECTED OFFICERS



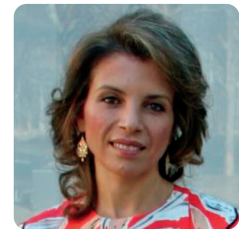
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Eastern Region



April Schindler, M.D.
Councilor at Large
Western Region



Kenya Windley, M.D.
APA Assembly Rep



LEGISLATIVE UPDATE



Robin Huffman
Executive Director

One of NCPA's top legislative priorities, Medicaid Expansion, was passed early this session by the North Carolina General Assembly (NCGA), but its ultimate future is dependent on a state budget being passed before July 1. By the time this newsletter is in your hands, we will know whether or not Medicaid Expansion (MedEx) will be enacted.

If it does become law, NC stands to gain a \$1.8 Billion federal bonus, the basis for the Governor's "Investing in Behavioral Health and Resilience" plan to rebuild the system and infrastructure and for H855, which is moving through the NCGA targeting \$1B to fund that plan.

These are some of the big, bold positive moves NCPA has urged for years—health insurance for all and putting dollars into a grossly underfunded public MHDD-SA system. Last session this move was stifled by legislative sleight of hand that stripped a telehealth bill passed by the House with new MedEx language in a bill that included too many "poison pills."



Medicaid Expansion Signing

At the bill signing ceremony March 27, on the grounds of the governor's mansion, both sides, DHHS staff, advocates, and NCPA celebrated its success.

NCPA is making progress on some (and winning at other) bills that are moving through the NCGA. We are working to protect

minors' rights to treatment that we fear could be reined in by any of several bills that push parents' rights. Nurse midwives achieved independent practice in fine print that was part of the abortion bill that passed both houses, was vetoed, and prevailed in veto override votes. Several bills we opposed did not meet the crossover deadline, an arbitrary date set by the NCGA when a bill must pass through one of the chambers in order to "stay alive" for the rest of the year and the next session.

One bill that has passed and been signed into law is H346, "Reorganization & Economic Development Act." This new law allows Blue Cross Blue Shield NC to hold for-profit corporations under its nonprofit umbrella status.

In general, NCPA has concerns about legislation that may increase the prevalence of addictive disease, such as cannabis and sports gambling bills. The sports gaming bill has passed, been signed by the Governor and is now the law. SB3, a cannabis bill introduced by a powerful state Senator that seeks to allow patients with certain medical conditions to be able to purchase cannabis legally, is still being debated in the House. NCPA's position on such legislation has been shared widely. Cannabis, despite medical research that identifies concerns about its long-term impact on mental health, is likely to win out in the end.

While we have opposed H218 the SAVE Act (with a great deal of help from NCPA member and NCGA Representative *Kristin Baker, M.D., L.M.*) for advance practice nurses, the NC Physician Assistants Association has engaged NCPA and worked with other medical groups to improve its practice bill—H75. This bill does not approve independent practice but removes the requirement for a supervision agreement if the PA is working in a team-based setting.

Bills that have been introduced that we support are still being debated:

- **HB 649** - "Ensure Timely and Clinically Sound Utilization Reviews" would require payer plain language, regular updates to their clinical review standards, timely decisions, consulting with the patient physician before denying payment for prescribed care, and a limit on retrospective denials.
- **S 473** - PCP and Psychiatrist Forgivable Loan Program
- **HB 576** - Health Care Practitioner Transparency Act (requires wearing ID to identify licensure)
- **S 147** - Advance Health Directives (trying to add Psychiatric Advance Directives)
- **HB 234** - Adds psychiatrists and licensed marriage and family therapists to the exemptions to reporting suspected child abuse from long ago to law enforcement
- **S 324** - Interstate Medical Licensure Compact (if NC passes compact, NC physicians can apply for expedited licensed in other compact states. Great value for border county physicians.

continued on page 11...

...“Annual Meeting” continued from cover

work examining relationships between the circadian timing system and sleep/wake patterns of children/adolescents and young adults, and the effect of insufficient and irregularly timed sleep and sleep disorders on behavior and mood during development.

Other notable speakers include Ryan Wagoner, M.D., D.F.A.P.A. (Impact of Violence on General Psychiatry Practice); Leah Fryml, M.D. (Treatment-Resistant Depression); Eva Telzer, Ph.D. (Social Media and Mental Health); and Nzinga Harrison, M.D. (Future of Suboxone). The schedule also has several in-state experts and NCPA members including: *Erikka Dzirasa, M.D., M.P.H.* (Eating Disorders); *Warren Kinghorn, M.D., D.F.A.P.A.* (Building the Therapeutic Relationship); *Michael Lang, M.D., D.F.A.P.A.* (Narcotic Prescribing); and *Chris Aiken, M.D., D.F.A.P.A.* (Top 10 Research Findings).

This year the meeting will also include concurrent workshops for each stage of practice featuring a panel of NCPA members; attendees will have the choice of attending one of the following workshops:

Beyond Definitions: Shifting from Practice to Retirement – *Harold Kudler, M.D., D.L.F.A.P.A.*; *Terry*

Yuschok, M.D., L.F.A.P.A.; and *Margie Sved, M.D., D.L.F.A.P.A.*

Challenges of the Sandwich Generation – *Rebekah Jakel, M.D., Ph.D.*; *Matthew Conner, M.D., F.A.P.A.*; and *Nora Dennis, M.D.*

Moving on Up: Transitioning from Resident to Attending – *Victoria Teague, D.O.*; *Hussam Alsarraf, M.D.*

The conference will take place at the Marriott Resort & Spa at Grande Dunes just steps from the beach. The Marriott Grande Dunes is the only 4-Diamond ocean front resort in Myrtle Beach, the property features indoor and outdoor pools, several restaurants, golf, tennis, and so much more.

Make your reservations today for the meeting to avoid overflow accommodations! Hotel reservations can be made now by calling the Marriott Grande Dunes at: 1-800-228-9290. Mention that you are with the North Carolina Psychiatric Association to receive the group rate of \$229. Plan to bring your family and extend your vacation. The discounted rate will be available 3 days before and after the Annual Meeting. Reservations must be made by August 28 to receive the group rate.

Register
Now!



SCAN ME



...“President’s Column” continued from page 3

and promote health equity. We must strive to eliminate barriers such as stigma, discrimination, and lack of cultural competence within our healthcare system. As psychiatrists, we have a pivotal role in collaborating with primary care providers, offering consultation, training, and resources to enhance their ability to provide comprehensive mental healthcare to ensure a more integrated and holistic approach to patient care.

The ongoing opioid crisis continues to ravage our communities, causing immense suffering and loss. It is imperative that we work hand in hand with other healthcare professionals, law enforcement agencies, and community organizations to address this crisis comprehensively.

Finally, the COVID-19 pandemic has brought to light the urgent need to prioritize mental health services and support for individuals affected by the unprecedented challenges brought on by the global crisis. As an asso-

ciation, we must continue to support research efforts, develop innovative telehealth solutions, and collaborate with policymakers to ensure that mental health remains a core component of public health response and recovery efforts.

In conclusion, I am honored to lead our association and embark on this journey of bridging gaps, fostering collaboration, advocating for equitable access to care, promoting integration, and supporting comprehensive approaches to mental health. Together, as members of the North Carolina Psychiatric Association, we have the power to effect positive change and shape the future of mental healthcare in North Carolina and beyond.

Thank you for your unwavering commitment and dedication to our profession.

Warm regards. 🌿

...“Negotiation” continued from page 5

WHAT TO LOOK FOR IN A CONTRACT

Contracts have become more complex and may include addendums or attachments. You must be certain to obtain all documents referenced in a contract and review them before signing. If there is anything you have trouble understanding, ask questions until you are satisfied. Review the contract for any credentialing requirements, billing, and balance billing provisions.

Be sure to know when your contract expires. Some contracts include an evergreen clause, which allows the insurer to automatically renew your contract. This is one way that bad provisions are perpetuated.

Check in with a lawyer. Your medical malpractice carrier can review the contract to ensure nothing in the contract conflicts with their policy.

THE BOTTOM LINE

Even though you may feel uncomfortable negotiating a contract for higher reimbursement rates it may pay

off significantly. Always read and understand every aspect of a contract before signing it!

Lastly, remember the APA’s Practice Management Helpline is available via 800-343-4671. The APA also has Private Practice Management Resources available, including information on contracting. 🌿

To view all of the APA’s Private Practice Resources, scan QR Code to the right with your phone.



To view the APA’s Quick Practice Guide on Contracting, scan the QR code to the left with your phone.

...“Legislative Update” continued from page 9

By the time you read this, it is possible that the NCGA may be close to closing up shop for this session, with plans to come back in a month or two to work on election maps and redistricting. So while the leadership is behind closed doors “duking it out” over the bud-

get, committees continue to meet and move forward or stall other bills introduced this session.

May they do their work with psychiatrists in mind. 🌿



NORTH CAROLINA
**Psychiatric
Association**

CALENDAR OF EVENTS

July 15, 2023

Executive Council Meeting
Virtual Only

August 28, 2023

Deadline to Make Hotel
Reservations in Room Block

September 28 - October 1, 2023

NCPA Annual Meeting
& Pre-Conference
Myrtle Beach, SC