

Awards Banquet to Honor Griffith, Faenza, Van Tosh: Scully Keynotes

Set for Thursday, November 13 at The Cosmos Club, the 2003 Washington Psychiatric Society Awards Banquet will honor James Griffith, MD as the Psychiatrist of the Year. Dr. Griffith, director of residency



James Griffith MD

training at GW will be recognized for his humanitarian work through the Center for Multicultural Human Services and his leadership in building a mental health care system in war-torn Kosovo. Michael Faenza, President and CEO of the National Mental Health Association is the winner of the second annual Paul and Sheila Wellstone Mental Health Visionary Award. The award, named for the late Sen. and Mrs. Wellstone, is presented to one who captures the Wellstones' passion and commitment to improving the quality and availability of care for persons who suffer mental illnesses. Mr. Faenza



Jay Scully MD

worked closely with the Wellstones and has played major roles in removing the stigma of mental illness and in making system-wide changes in the delivery of care that have enabled many otherwise untreated persons to receive the care they need. Laura Van Tosh of Silver Spring has worked tirelessly to give hope to her fellow sufferers and has been a key player in improving services in Montgomery County.

Also recognized will be James Dee, MD and Catherine May, MD who will receive the WPS Immediate Past President's Award for their leadership of and service to the Society.

The evening begins at 6:30 with cocktails, followed by dinner and the Awards ceremony. Our keynote speaker will be Jay Scully, MD, APA's new medical director. Dr. Scully will speak on "21st Century Psychiatry

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Laura Van Tosh

and the Role of APA." Also joining us will be APA President, Marcia Goin, MD as well as APA's other officers and candidates for office in the 2004 elections.

You may register for the Banquet by completing the form on page 5. Tickets for the 2003 Awards Banquet are \$50 per person. You

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The President's Column

By Jeffrey S. Akman, M.D. President



“You Sure Are Cheap!”

As we enter the season when employers and employees select their increasingly costly health insurance plans

I'm reminded of something a patient said to me after paying his \$20 co-pay. He settled nervously into the chair and said, “I'm surprised. You sure are cheap.”

When I assumed the chair of GW's psychiatry department three years ago I took over a business that was hemorrhaging hundreds of thousands of dollars. (Being part of a nonprofit organization was being taken too literally.) The department as part of the medical center's larger faculty practice group participated in many private insurance and managed care plans. We accepted patients with Medicaid, Medicare and DC Alliance. We had a reduced-fee training clinic. There was certainly no shortage of patients. Our psychiatrists, paid below already low academic standards, were taking night and weekend call, seeing lots of patients, and working very hard.

It was a no-brainer to realize we were underpaid for our services and that our expenses were too high. But what was not clear was how little we were being paid for our services and how expensive it was to extract the deeply discounted dollars owed to us.

My colleague Dan Lieberman, MD and I began to look at the real dollars that we were actually being paid for our work—that is after factoring in all of the denials and refused claims. It was truly obscene. For a psychotherapy hour we were recouping approximately \$40/hour from Blue Cross and Blue Shield. The other insurance plans were almost as bad. And yet to get that \$40 required an untold number of hours completing paperwork, tracking authorizations, submitting and resubmitting claims and waiting on the telephone. There was no way that \$40/hour could pay for faculty and staff salaries, benefits, rent, supplies, malpractice insurance, etc. Deficit

spending might work for George W. Bush, but it's tough to keep a business afloat when it's in the red.

The denials were becoming more frequent and increasingly arbitrary and capricious. Clearly the intent of the insurance companies was to keep costs down by limiting access to care and creating obstacles to keep from paying for services rendered. The straw that broke the camel's back was when MAMSI denied a claim saying that the psychiatrist's signature on the treatment form was “illegible” even though the name was typed below the signature.

And so, we believed that we had no choice but to exit each private insurance and managed care plan—not a very common strategy for an academic department. Not surprisingly, getting out of managed care allowed us to immediately cut costly overhead including the excessive time physicians were spending on authorizations and paperwork. We reduced the number of staff positions in which their primary responsibility was to interface with the insurance companies. And, we are now reimbursed a fee that more appropriately compensates us for providing sophisticated, lifesaving psychiatric care for our patients and their families.

We still have a reduced-fee-training clinic and we have the capacity to modify fees as necessary. As part of the GW medical center, the psychiatry department still takes Medicaid, Medicare and participates in the DC Alliance. But participating in these plans is becoming increasingly tenuous. DC Alliance does not reimburse for psychiatric services. Medicaid rates are impossibly low. With Medicare comes not only low rates but thousands of pages of regulations.

As my patient implied, providing “cheap” medical care means that psychiatrists are subsidizing the insurance companies and the government. It's galling. This seems especially so when considering that CareFirst's earnings in the first half of



THE WASHINGTON PSYCHIATRIC SOCIETY News

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2003 rose 34% to \$66.2 million and their chief executive earned \$2.8 million in salary and bonuses last year.

The bottom line is that we have a health insurance crisis where both the practitioners and the consumers are being gouged while the executives of health insurance plans are making out like bandits. Something has got to give. ■

APA Fellowship Applications Due January 31, 2004

APA is now accepting applications for both Distinguished Fellow and Fellow. For details on the application process and eligibility for DFAPA and FAPA visit the Members' Only section of the WPS website.

www.dcpsych.org Use your last name as the user name and your APA id number as the password. ■

Awards Banquet continued from page 1

may enclose a check with your reservation or pay at the door. Members-in-Training may attend at no charge. Last year saw an overflow attendance. Register now and make sure your seat is reserved. Our corporate sponsors are MAMSI, GlaxoSmithKline and Pfizer Pharmaceuticals. ■



Michael Faenza



Catherine May, MD



James Dee, MD

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ANNOUNCEMENTS:

Dr. Brian C. Campden-Main is retiring. Dr. Campden-Main, a psychiatrist in Virginia for 52 years, specialized in working with couples and in the area of sexual dysfunction. He was also involved in the development of unipolar ECT. He is still collecting wine and is already bored. If you would like to call him and reminisce, please telephone him at 703-262-6695 or e-mail him at FFTC@aol.com.

PROGRAMS

Baltimore-Washington Society for Psychoanalysis
December 6, 2003, 5:00-6:30pm: Beth Seeling, M.D., "INHALING MOM – THE ATMOSPHERE OF MATERNAL ALTRUISM", Judith Chertoff, M.D., Discussant. For details: www.bwanalysis.org or call 410-792-8060 or 301-470-3635.

The Institute of Contemporary Psychotherapy & Psychoanalysis presents MARK EPSTEIN, MD, Buddhist psychoanalyst and author of *Thoughts Without a Thinker*, *Going to Pieces Without Falling Apart*, and *Going on Being*, Saturday December 6, 2003. 8:30am-12:30pm at The Holiday Inn in Georgetown, 2101 Wisconsin Avenue, NW, DC. Three CEs. Nonmembers (\$75), Members (\$50), Students (\$20). Preregistration required. Mail check to: ICPP&P, 3000 Connecticut Avenue, N.W., #108A, DC 20008. Info: 202-686-9300 x4. ■

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Zig Lebensohn MD Dies at 93

A founding member and the fourth president of the Washington Psychiatric Society, Zigmond Lebensohn, MD died after a heart attack on September 21 at the Grand Oaks assisted-living facility in Washington.

A Washington psychiatrist and neurologist, Dr. Lebensohn was appointed chief of psychiatry at Sibley Memorial Hospital when that facility opened in 1957. He retired from the hospital in 1976 but continued to treat patients there and at his private office.

Dr. Lebensohn last addressed his WPS colleagues in 1999 at the Society's 50th Anniversary Celebration. He with, Addison Duval, MD, Robert Morse, MD, Norman Brill, MD, Henry Laughlin, MD and Philip Litvin, MD founded WPS on February 10, 1949. At the 50th Anniversary, Dr. Lebensohn recalled those early days of the Society and the vision that led to its creation. "We had wonderful friendships in those days," he said. "1949 was memorable for the two organizations founded that year," he continued. "NATO and the WPS. Today, they have Kosovo; we have managed care."

Under his leadership in those early days, WPS was among the first organizations in Washington to include African-American colleagues as members. He recalled having to schedule WPS meetings at National Airport because that was the only facility in the area where blacks and whites could meet together.

Throughout his professional life Dr. Lebensohn was an advocate for providing specialized psychiatric care in general hospitals. He advocated for the legal rights of persons with mental illnesses and the decriminalization of abortion.

After completing an internship in psychiatry at Chicago, Dr. Lebensohn came to the Washington area in 1935 and served four years on the staff at St. Elizabeths. During WW II, as a Naval medical officer he trained Navy psychiatrists and served in the Pacific on the hospital ship Samaritan.

His first wife Mary died in 1975. Dr. Lebensohn is survived by his wife Nancy, four children and 12 grandchildren. ■

APA Will Finish Year \$4 M in Black, Trustees Told

By Roger Peele, MD, DLFAPA Area III Trustee

The Board of Trustees met October 12, 13 in Tampa, Florida, at the Westin Innisbrook Resort, and the following are the highlights. "Why Tampa?", I asked, and we were told there was a desire to convene in juxtaposition to the American Psychiatric Foundation that was meeting in Tampa at this time, and that the costs were the same as meeting in Arlington.

APA revenues this year seem likely to exceed expenditures by about \$4 million, i.e., \$57 million revenues and \$53 million in expenditures. Higher revenues than expected are taking place in three areas: 1] higher annual meeting revenue, 2] higher publication income, and 3] more private donations. [Relative to the annual meetings, about 6 to 7,000 APA members have been attending over the past decade, the big increase in attendance has been nonmembers.] The \$4 million will go into reserves.

Abe Hostetter completes four years as President of the American Psychiatric Foundation. Altha

Stewart will become the new President. There were many positive comments made on the Foundation's growth under Abe. For those who have not heard, Abe is moving from Hershey to Charlottesville, VA.

Trustees approved Assembly motion to encourage the federal government to establish and fund universal health care access. Note that this is a general motion, not specifically endorsing a single payer system.

Membership in the APA has not changed substantially, but the proportion of non dues-paying members has increased.

Washington State Psychiatric Association, not Washington Psychiatric Society, is considering an affiliate membership category that would essentially allow folks to avoid paying APA dues while being an affiliate member of that District Branch. The Board asked that the Assembly Executive Committee again look at the issue of Area III Trustee nominations. (Dr. Peele is currently running unopposed. ed) ■

APA Names Dr. Eist a "Profile in Courage"

The American Psychiatric Association has named Harold Eist, MD, DFAPA the winner, along with Pennsylvania's Daniel Schrage, MD of the 2003 Profile in Courage Award. Dr. Eist's strong stand for patients' rights to confidentiality of their records which culminated in the Circuit Court of Montgomery County overturning a decision by the Maryland BPQA to fine and reprimand Dr. Eist led WPS and

individual members to nominate him. Our congratulations to Dr. Eist for his willingness to stand firmly for patient rights at the risk of great personal and professional risk. The Award will be presented during the APA Assembly meeting, November 14-16 here in Washington. To read the WPS amicus curia brief submitted to Circuit Court visit the Members Only section of the WPS website at www.dcpsych.org. ■

WPS Educational Meetings Draw Enthusiastic Crowds, Meet CME Needs

Beginning in January with Paul Chodoff, MD's "Dynamic Psychotherapy: A 50 Year Perspective," the Washington Psychiatric Society's Committee on Continuing Medical Education has provided members a well-rounded and varied schedule of

CME opportunities. Our CME year culminates with the Awards Banquet on November 13 (see page 1) with Jay Scully, MD's "21st Century Psychiatry" lecture. Here's a photo essay of events this year.

Continued on next page



On May 6 WPS members gathered for dinner, conversation and education at Washington's Oceanaire Restaurant. Featured speaker was Charles Price, MD of Reno, NV whose presentation "The Psychopharmacology of Energy and Fatigue" was sponsored by Cephalon. Here (l-r) Walter Bland, MD, Carol Kleinman, MD, Catherine May MD and Steve Rojcewicz, MD share a moment over dinner.



With over 50 psychiatrists present, the May 6 event allowed members to visit with old friends and make new ones. Here Rachel Ritvo, MD engages Carol Lynn Trippitelli, MD (standing) and Nancy Younan, MD.



On July 17 WPS members again filled the dining room, this time at Maggiano's in Tyson's Corner to hear Robert Lehman, MD of Baltimore discuss the latest research in treating ADHD. Dan Hicks, MD (l) Chair of the CME committee talks with Dr. Lehman. Eli Lilly sponsored the program.

2003 Washington Psychiatric Society Awards Banquet

**6:30-9:30 p.m. Thursday
November 13, 2003**

Cosmos Club

**2121 Massachusetts Ave. NW
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*WPS Educational Meetings
continued from previous page*



WPS has instituted a mentoring program that matches young psychiatrists with those more established. Mentors, provide insight into practice management, contacts into the psychiatric community and advice on non-clinical matters. Catherine McCarthy, MD and her mentor Richard Ratner, MD enjoy themselves at Maggiano's.



Hurricane Isabel was no friend to WPS, keeping away almost half of those registered for the September 20 half day CME program, "Medical Updates in Psychiatry" at the George Washington University Hospital. Here, the brave souls who could attend gather for the first of four sessions. Speakers addressed issues of thyroid disease, diabetes, Hepatitis C and cardiovascular disease and their relation to psychiatric illnesses.



(l-r) Jeff Akman, MD President of WPS, Stephen Clement, MD, and Dan Hicks, MD pose prior to Dr. Clement's presentation on thyroid disease. He also delivered the lecture on diabetes. GlaxoSmithKline sponsored the four-hour CME program.



James Lewis, MD answers questions at the podium following his lecture on Hepatitis C.



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Positions Available

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240-895-4289, fax 240-8954937, email hvdovan@smcm.edu, website <http://www.smcm.edu>

Catholic residential psychiatric facility (www.sli.org) located in the WashDC metro area serving Catholic priests and religious from U.S. and abroad looking for part-time staff psychiatrist. Strong Catholic background. Excellent working environment. Contact Nancy Farran, Saint Luke Institute, 8901 New Hampshire Ave, Silver Spring MD 20903, 301-422-5403, nancyf@sli.org

Psychiatrist-FT/PT for Oasis, a new urgent care psychiatric center (Annapolis) assessing adolescents, children and adults as an alternative to the ER. Work with an interdisciplinary team in an out-patient setting. Oasis's hours are 5 p.m. to 12 midnight seven nights a week. Rotating schedule with full or part-time hours available. Credentialing by insurance companies required. Excellent hourly rate. Benefits provided if full-time. Please contact Kathy Miller at 410-268-8590 and fax resume to 410-263-8539. ■

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Letters-to-the-Editor



In his remarkably insightful book, Leadership Secrets of Attila the Hun, Wess Roberts points out that one should “never shoot the messenger for bringing the message... You only shoot him when he doesn’t.” In two letters to the editor in the September/October issue of *WPSNews*, several of my colleagues have failed to separate the message from the messenger.

Drs. Landau and Hersh, and Dr. Eist take exception to the article describing the survey of Magellan providers I conducted in June 2003 (*WPSNews* July 2003). They object to the article’s statement that Magellan panelists are largely

satisfied, and expressed consternation at the “remarkable tolerance for and endurance of difficulties” that panelists must have.

I stand by the survey results reported in the article. Readers may have a visceral reaction to the reports of the survey participants, but what you see is what they said. I, and perhaps other readers, draw the conclusion that the great majority of psychiatrists who are unhappy with Magellan in particular or managed care in general have already left the panels. Therefore, those panel members who actually answered the questions in what was accurately described in the article as

a snapshot survey are undoubtedly less dissatisfied with Magellan than Drs. Landau, Hersh and Eist are. Some may not like the message, but it is what it is. The article and its headline were admittedly provocative, and were meant to be. What I find discouraging is that only four out of 961 WPS members were motivated enough by the article or by their dissatisfaction with managed care to actually complete the comprehensive survey found in that same issue. It raises the question as to whether or not the record really does need correcting. ■

James F. Dee, PharmD, MD
Past President, WPS

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