# IPS MIND MATTERS

Official Publication of the Illinois Psychiatric Society

## Spring 2020 | Issue 44

## Welcome to Mind Matters, the official publication of IPS.

Please let us know how we can improve on your user experience so all of our members can continue to find value and enjoy this publication.

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## **President's Message**

Better Days Ahead...

To all of you who have recently lost family members, loved ones and patients, I offer my deepest sympathy. All of us have been deprived of close social contacts, old routines, and a particular vision of the future.

Between coronavirus, lynchings,

shootings, abuse of immigrants, deaths from fentanyl, global warming, and politics, these have been terrible times. We have lost the comfort of a predictable world. Those of us privileged to plan our own futures may now glimpse the anxiety felt by the world's majority, who have always lived with uncertainty. We are shocked by the widening gulf between those who lack food, housing, healthcare and jobs, and those who have too much. But the courage, kindness and commitment of Black physicians in the face of systemic racism is a healing balm to all. White doctors owe all others so much.

Grief surrounds us. Yet there have been accommodations to the pandemic which brighten our lives. We are suddenly using telehealth, which we may have viewed with suspicion and confusion before March 2020. Now it's normal. Tele-health is as radical an innovation as the telephone must have been in its time. IPS and APA are part of a national movement to codify rules for insurance to reimburse doctors for telehealth at the same rate as in-person care, including audio-only visits.

Using the internet (which needs to be stretched to include everyone) we can watch webinars day and night. We can log in to conferences, reunions, weddings all over the world, without

IPS Members Meet Rep Welch on Facebook Live

Asylum Evaluations and Psychiatry

Trauma-Informed Care – A Necessary Transformation

Are you willing to attend an inperson IPS event in 2020?

Yes, Definetly!

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Only if outside.

Select

No, too risky!

Select

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leaving home. The air has become cleaner. People walk outdoors. We've contacted old friends. We are getting more adventurous in the kitchen, with whatever is on hand.

During this era of coronavirus, the Illinois Psychiatric Society has not stopped advocating for IPS members. We are working on multiple fronts (see column by our esteemed lobbyist Betsy Mitchell). We are collaborating with other medical professional societies to protect parity for treatment of mental illness and substance use disorders, and to defend physicians and patients from the restrictive practices of insurers such as inappropriate definitions of medical necessity.

Several pressing state legislative issues will demand our attention in the coming year, including prior authorization for health care services and prescriptions, tele-health regulation, and psychologists' authority to prescribe for children and seniors. Legislation thrives on data: Think about how you can collect data on effectiveness of what you do, eg telepsychiatry, and report your findings on how it has impacted access to care, and where it has made the biggest difference. This is information legislators want, to justify the rules we want them to make.

New IPS projects this year are the Fiduciary Oversight Committee, which will manage our investments, the Retirement Committee, which will bring pre- and post-retirement members together to socialize and learn from each other, and the Anti-Racism Task Force. Each of these small groups has met once. Participation in committees is open and encouraged for all IPS members. Furthermore, IPS relies on members to raise issues of concern, so we can find solutions together.

The IPS Anti-Racism Task Force needs your help to uncover the history of racism within IPS, and to examine the ongoing impact of racism on psychiatrists and patients. Only then can we identify appropriate actions to right the wrongs within our organization. Please send your observations and thoughts to me on this.

We need to mentor and lift up young people of color, and open pathways for them to become mental health providers. We must support current medical students and residents facing systemic racism. When we see something wrong, we have to say something. No more willful blindness.

Stress due to the pandemic and its vast economic impact has brought the importance of mental health care into public focus. Reopening of community mental health centers and increasing inpatient psychiatric beds are high priorities. IPS needs to speak out while state, county and local authorities are receptive. We can provide mental health education for police officers and prison guards, and support the creation of mental health outreach and safety net programs, especially for uninsured or homeless people.

Our Governor J.B. Pritzker and the Chicago's Mayor Lori Lightfoot are sympathetic to people with mental illness and substance use disorders. Let us all reach out to our elected officials and offer psychiatric expertise and guidance during the post-covid reopening process, and promote better access to care through telepsychiatry and collaborative care.

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# PRACTICING TELEPSYCHIATRY?

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## **State Legislative Update**



By: Betsy D. Mitchell, MPA IPS Legislative Consultant

## The Condensed Session:

The Illinois General Assembly returned to Springfield on May 20, 2020 for the unique four-day COVID-19 Special Session limited to only seven issues listed below. For the first time since March 5, legislators met in person in

Springfield. Prior to the Special Session, legislators had been meeting virtually in newly assigned working groups that were centered on several pending issues related to difficulties associated with COVID. No voting took place in these working groups; instead, they provided recommendations to the entire body.

In light of the pandemic, special precautions were implemented during the Special Session, as outlined by the Illinois Department of Public Health. The Senate met in the Senate Chambers at the Capitol, but individual Senators could only come to the Senate Floor when needing to speak on an issue and to vote, and no more than 10 legislators were allowed to be on the floor at the same time. The House of Representatives rented the Bank of Springfield Convention Center a few blocks away and requested a set-up that included 118 desks set six feet apart equipped with voting buttons, limited public and lobbyist access, and masks to be worn at all times. In addition, no legislator was to have direct contact with anyone when not in session, and to test and quarantine themselves for seven days following session.

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## Virtual Career Fair - Employer Booth Registration NOW OPEN!

September 17, 2020 | 6-9 pm | More Information





You

are invited to participate in the next meeting of the IPS Anti-Racism Task Force.

Wednesday, Aug. 5 | 7 pm Contact <u>Kristen Malloy</u> for the join link.

This group will meet every other Wednesday at 7 pm.

Related Reading: Medical Schools have Historically been Wrong on Race.



## In re Julie M., 2019 IL App (4th) 180753

By: Meryl Sosa, Esq.

In this case, the Illinois Appellate Court considered whether the Circuit Court properly found respondent to be subject to involuntary admission for psychiatric treatment after she had already been voluntarily admitted for medical treatment, and whether the Circuit Court properly denied respondent's motion to dismiss the State's petition involuntary admission. In re Linda B., 2017 IL 119392, an Illinois Supreme Court case involving respondent, was central to the decision-making in this case.

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## Major health insurance companies fined for violating Mental Health Parity law

In a historic move on July 15, 2020, Governor Pritzker's administration has announced \$2 million in fines for five major health insurance companies for violating the Mental Health Parity and Addiction Equity Act (MHPAEA). This Act is a federal law that requires health insurance companies to provide the same level of benefits and coverage for mental health and substance use treatment as they do for medical or surgical care. The following companies were fined: CIGNA Healthcare of IL, UnitedHealthcare, CIGNA Health and Life, HCSC (parent company of Blue Cross Blue Shield) and Celtic. Press release is available here.

## **Recent and Proposed Changes in Illinois Mental Health Laws**

By: Mark J. Heyrman, Monahan Law Group, LLC



The following article originally appeared in Mental Health Matters, the newsletter of the Illinois State Bar Association's Section on Mental Health Law, and is republished here with the author's permission. This article summarizes some of the key changes to mental health statutes enacted by the Illinois legislature during

the 2019 legislative session and those currently under consideration.

## **LAWS ENACTED IN 2019**

**Public Act 101-0251.** Creates the Mental Health Early Action on Campus Act. The Act requires public colleges and university: (a) to provide training and resources, including on-line resources and peer support services to students regarding mental illnesses and (b) create collaborations with local mental health providers to increase services to students. It requires the Board of Higher Education to create a Technical Assistance Center to develop standards regarding mental health services at colleges and universities.

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## Risk Management for Residents-

August 13, 2020 Click HERE for more.

## **Virtual Career Fair-**

September 17, 2020 Click HERE for more.

The following events were cancelled due to complications arising from the pandemic:
The Women's Brunch
The Annual Meeting
IPS is working to create other meaningful events in their place.

## Member Spotlight - Sudhakar Shenoy, MD

I am Sudhakar Shenoy MD, a community psychiatrist. I like to work with the under-served



## Alone in Medicine

By: Sarah Michael, MD

The smell of grilled steak and chicken filled the room. Bright colors hung from the tables and windows. Clusters of people snaked

throughout the room, drink in hand, meeting one another and laughing. There was excitement and a rivaling, anxious uncertainty, intertwined with feelings of hope and belonging. My husband and I, at the time, had just become engaged.

A car ride away, a coworker and friend spent the day alone. She finished up a grueling two weeks of night shifts, during which she was responsible for all the psychiatric needs that arose throughout the hospital. She would get ready for her shift before others arrived home from work and end after others had started their day. She spent her waking hours in a small, cinder block room, consisting of a bed furnished with sterilized blankets, a computer, and a television that broadcasted a few news channels. I celebrated acceptance into another family; she took her life.

Death hurts, but her suicide swallowed me whole. I don't know what she did the day she ended her life, but the depth of her aloneness has become an imagined memory for me, hiding struggles with depression and demons; dreams and longing.

The feeling of isolation is a known and well-studied risk factor of suicide. Today, it is more relevant than ever. COVID-19 in a surreptitious and overwhelming manner, changed the way we live. Public health priorities have reasonably been on preventing



population in Illinois. The need for a Fellowshiptrained Child and Adolescent Psychiatrist like me is immense,

especially when schools are affected and our children's "safe environment" feels no longer safe in this COVID-19 era. My special interests include working with children affected by Autism Spectrum disorder and intellectual disabilities.

Future Goals: I have a motto that describes my role as a doctor "Learn to serve; Serve to learn". Going ahead, I see myself more involved in a role that every physician must take, which is, being an advocate for mental health policy making and leadership.

Hobby: Travel Photography. I've always had an observant eye but my love for photography began as a means of sharing my travel with my mom and dad back home in India. Travel, landscape, and people are recurring themes in my photos.

Resilience in the face of adversity has always been my strength.



Photo Credit: Dr. Shenoy

\*If you or someone you know would like to be featured in our Member Spotlight, please contact <u>Kristen</u> <u>Malloy</u>.

the spread of COVID-19, galvanizing action on a global scale that has included self-quarantine and social distancing. While these measures have been effective, these measures have amplified what it means to be alone: a man who has not spoken to or embraced anyone in months; an elderly woman who doesn't know how to use Zoom; a family that doesn't own a computer to connect to their loved ones in the state over; a young, gay college kid stuck with his parents who haven't quite accepted him yet.

We have yet to become fully aware of the ramifications of these necessary interventions. Initial surveys have found that the population is experiencing increased stress, as well as anxiety and depressive symptoms. Predicting the consequences of COVID-19 on mental health is more than just understanding how anxiety and depression emerge, present, and evolve. It is important that we understand aloneness and learn how to elicit information about this feeling from our patients, colleagues, friends, and family.

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# Thinking About Retirement By: Martha Zuehlke, MD

With our tireless director Meryl Sosa's initiative, Drs.

Lavoll, Hardy, Pinto, Swaminathan and myself have talked over some ideas how IPS might support discussions about the overall experience of retirement, the decision process, the planning, and the problems foreseen and unforeseen. We found ourselves most interested in what each other was doing and how we are feeling about the retirement.

Just as there are numerous different paths in a psychiatric career, there are a range of paths in retirement. While some of us have slowly tapered off our responsibilities, some have been suddenly thrust into a medically mandated retirement. Some of us are continuing attenuated clinical work and/or mentoring, which was too close to the heart to stop. Some are engaged in advocacy work within our field while others are engaging in new volunteer and advocacy work in political, environmental and social justice arenas. Many of us are pursuing previous and new interests in arts, music, philosophy, etc. Most of us are appreciating the opportunities for more time with family and friends, now obviously modified by the pandemic.

We are curious to see if there is any interest among the IPS members to discuss life after leaving the work which has informed our lives up to this point. Please feel free to reach out to any one of us mentioned in this article and join our next virtual conversation, which will be in the 4<sup>th</sup> week of September (date and time to be decided by consensus).





On June 23, 2020, three IPS members, Dr. Adrienne L. Adams, Dr. Chandan Khandai, and Dr. Danielle Jackson, met with State Representative Emanuel "Chris" Welch (D-Hillside) for a 30-minute Facebook Live conversation. Among other things, they discussed the impact of pandemic, police brutality, and protests on mental health, the importance of humility and curiosity when treating patients from different backgrounds, structural and systemic inequities, and social determinants of mental health. The conversation ended on a positive note, reminding viewers to exercise self-care during this time. Video recording is available here.

This was a great example of advocacy by engaging with a lawmaker directly, and I hope for more such opportunities. It is critical that we as psychiatrists and IPS members reach out to legislators and build relationships with them. We want them to know that we are their constituents and use us as a resource on mental health issues. In light of the pandemic, many legislators have been meeting with their constituents via social media platforms and video conferences. Remember to connect with your legislators by sharing patient vignettes, ask them to do something specific to support the issue of our interest (for example, supporting a bill to codify telehealth), and thank them for their time with you. Please contact IPS if you need assistance connecting with your legislators. You can look up who your legislators are here.



## **Asylum Evaluations and Psychiatry**

By: Erin Zahradnik, MD
Prior to the COVID-19 pandemic, U.S.
immigration policy for asylum seekers was
already a humanitarian tragedy, rife with
inhumane practices such as parent-child
separation and lack of basic necessities in
detention centers. Recent immigration policies
implemented since the pandemic have
suspended the asylum system indefinitely.
Thousands of asylum seekers, including
children, have been left with no other choice
than to crowd together in migrant border
camps and wait. In addition, detention centers
are still full of people, fearful of the pandemic,
family separation, and deportation.

What can we, as psychiatrists, do to help? Organizations such as Physicians for Human Rights (PHR) rely on trained, volunteer health professionals around the country to provide physical and psychological evaluations of asylum seekers. As psychiatrists, we can provide critical help by diagnosing and documenting the trauma and persecution that led the potential immigrants to seek refuge in the U.S. The asylum seekers are not simply immigrants seeking a better life, they are people seeking a life. If they return to their home countries, many risk further persecution, torture, or even death. Our affidavits can support their asylum application by explaining the situations they have endured and the reasons why they cannot return to their countries of origin.

If you are interested in learning more about asylum evaluations, visit <a href="http://phr.org">http://phr.org</a>.



## Opioid Prescribing and Sexual Harassment Course

The Illinois Society of Addiction Medicine is planning two more conferences to be held before the September 30<sup>th</sup>

relicensing deadline. The first will be on August 8 from 8-noon. The second will be on September 12. The 3 hour <u>opioid</u> <u>prescribing course</u> developed by the American Society of Addiction Medicine will be presented along with 1 hour of CME on sexual harassment.



## **COVID-19 Resources**

IPS is monitoring the evolving COVID-19 pandemic in Illinois, and has created a resource guide for psychiatrists and the

## Free Telepsychiatry On-demand Tutorial from PRMS

The issues around telepsychiatry are more confusing than ever. To provide some answers to these uncertainties, we have created a **Telepsychiatry On-Demand Tutorial**. This ondemand tutorial covers changes to the regulatory framework during COVID-19, including the lifting of laws and regulations, such as licensure and prescribing laws. We also address preparing for what's next, tips for practicing telepsychiatry, and professional liability insurance considerations.

community. We will keep this page as updated as possible but please let us know if you have additional resources that you think would benefit the entire membership.

**COVID-19 Resources** 



# Trauma-Informed Care – A Necessary Transformation

By: Peter Nierman, MD

For over a century, the field of psychiatry has recognized that past experiences provide a

frame for events in the present and anxieties about the future. While psychiatrists may have once perceived that imagined internal drives acted in an interplay with our nuclear family objects, today, the fields of psychiatry and psychology recognize that many mental health and behavioral pathologies are associated with actual experienced trauma. Data reveals that over half of our population have endured trauma such as physical and emotional abuse, neglect, domestic violence, sexual assault, mass shootings, combat, physical illness, or environmental disasters.

There is a strong relationship between trauma and neuropsychiatric changes. Post-traumatic stress disorder was first characterized in 1941 by Abram Kardiner. He described individuals who suffer from enduring vigilance and hyperreactivity to environmental stimuli. Cognitive impacts of trauma include difficulty concentrating, distrust, guilt, diminished expectations, depression, dissociation, and psychotic episodes. Physiologic changes include hyperarousal and vigilance, increased startle-reflex, and fight or flight responses to non-threatening stimuli. Behaviors that have been linked to trauma include anxiousness, social isolation, avoidance, sleep difficulties, substance use, suicide, and aggression.

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