



MIND MATTERS

Official Publication of the Illinois Psychiatric Society

WINTER 2022 | ISSUE 53

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

By: Abdi Tinwalla, MD

Happy New Year to all of our IPS members! I hope everyone had a joyous and restful holiday season. I sure did, as my family and I traveled to India for the month of December to spend time with relatives.

While we all settle back into a regular routine, IPS is gearing up for a busy year. We are planning a year of amazing events that kick off on January 26th with our first session of the 2023 Virtual Series titled: "Psychiatry in the 21st Century: Where Might the Future Take Us." Registration is currently open for the first three sessions of the virtual series and can be completed on our website. Be sure to watch your emails for more information regarding upcoming events.

Speaking of the website, our staff, Kristen Malloy and Meghan Engelbrecht have worked very hard over the last several months to create a brand-new website. It launched on January 1st, and we are very excited for you all to see it and more importantly, use it. There is more information about the new site further below in this newsletter issue. Be sure to check it out for yourself at www.illinoispsychiatricsociety.org.

IPS will also be heading into a very busy legislative session, enlisting the help from our trusty lobbyist, Mark Peysakhovich, and his team to help us navigate the spring session and stay within the IPS values and mission to protect patient safety. IPS leadership has already met to discuss the IPS 2023 Legislative

Biomarkers in Predicting and Managing Post-Traumatic Stress Disorder (PTSD)

Member
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Navigating the Realm of Private Practice



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2023 Events

Virtual Series:
Session 1: 1/26
Session 2: 2/23
Session 3: 3/30
Session 4: 4/27

Lobbying Activities

Rooftop Event

Women's Brunch

Annual Meeting

And More!

Priorities. They are as follows:

The goal of IPS advocacy in the 2023 year is to raise quality, parity, equity and access to psychiatric care, for all citizens of Illinois. We believe this can be achieved by focusing our legislative agenda on these key points:

1. **Increase access to psychiatric care through funding** additional residency training positions, funding and retaining additional psychiatrists at state hospitals, and increasing acute care capacity to fit the needs of the state.
2. **Increase access to care through ensuring** full parity for psychiatric treatment, a streamlined prior authorization process for medications, and increased availability of safe, evidence-based means for accessing care, such as telepsychiatry and collaborative care.
3. **Update and modernize Illinois' mental health code and mental health court** to ensure all patients have access to safe, evidence-based care in the least restrictive setting.
4. **Ensure safe, effective treatment of patients** by appropriately-trained professionals who adhere to the latest standards of care.

As we continue our advocacy efforts, and work on this list of priorities throughout the year, we will need to enlist the help of our fellow psychiatrists across Illinois. We will be reaching out throughout the year with ways to help advocate for our patients and profession. Every lobbying effort matters, every single member matters. Help us, help you! Be sure to watch your emails for more updates on lobbying efforts and ways you can get involved. You can also email our Director of Operations, Kristen Malloy at kmalloy@ilpsych.org to get involved now.

I am looking forward to serving you all for the remainder of my presidential term this year and wish you a safe, happy, and healthy 2023.

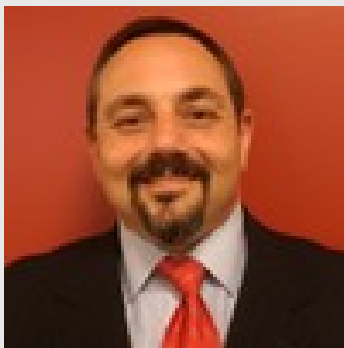
The NEW IPS Website is LIVE!

We are so excited to launch the new IPS website with new and improved features for all of our members and their patients.

Please take a few minutes to check it out and see what it has to offer. We plan to keep improving the site in the coming months so keep checking back. Many thanks to our staff for the work on this project.

Visit the new IPS website via the NEW URL:
<http://illinoispsychiatricsociety.org>





State Legislative Update

By: Mark Peysakhovich, *IPS Legislative Consultant*

2023 Promises to Be a Busy Year in Springfield

The 102nd Illinois General Assembly, which is wrapping up its second year of a two-year term, is scheduled to conclude in early January 2023, before the 103rd General Assembly is sworn in on January 11, 2023.

The past two years in Springfield have been notable for a number of reasons, some good and some not so good. Of course, as is the case with everything else in our lives, COVID provided the major backdrop during this time. And while the pandemic caused a lot of misery and unprecedented challenges, it also presented a unique opportunity to educate the public about the importance and the fragile state of our health system in general, and about our overwhelmed mental health system in particular. All sorts of taboos were broken during this period, as more and more people felt empowered to talk about their mental health challenges with unprecedented openness.

This new reality created the impetus for state officials to make important changes in state mental health policies and to make significant investments in mental health access and quality. This progress resulted in significant changes, including the reform of state mental health parity and prior authorization laws, full implementation of the 988-suicide prevention/mental health crisis hotline, a permanent extension of tele-mental health coverage, the creation of the Illinois Chief Mental Health Officer position, significant funding allocations to expand behavioral health access and other big improvements in our system. IPS was pleased to collaborate with our coalition partners in support of these important accomplishments.

The upcoming legislative session promises to be just as active and just as important for IPS. We plan on major issues, such as an expansion of psychologist prescribing, to keep us very busy and focused on patient safety, access and wellbeing. We hope you will support these efforts by being active in IPS' advocacy activities!

In the meantime, below is recently released information on the 2023 legislative calendar and upcoming key dates. The spring session of the Illinois General Assembly will begin on January 11 and end on May 19, 2023.

Session calendar of the Illinois House of Representatives:

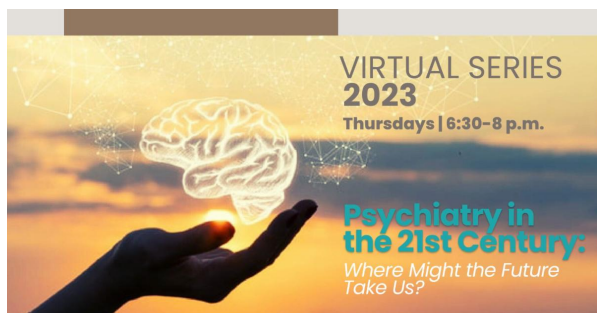
https://www.ilga.gov/house/schedules/2023_SPRING_SESSION_CALENDAR.pdf

Session calendar for the Illinois Senate:

https://www.ilga.gov/senate/schedules/2023_Spring_Session.pdf

Key upcoming dates:

- January 3 – New Congress sworn in in Washington, D.C.
- January 4-7 – State lame duck legislative session in Springfield.
- January 9 – Inauguration for Governor and all statewide offices in Springfield. Governor J.B. Pritzker, Lieutenant Governor Julianna Stratton, Secretary of State Alexi Giannoulias, Attorney General Kwame Raoul, Comptroller Susana Mendoza and Treasurer Michael Frerichs are all getting sworn into four-year terms.
- January 11 – Legislative swearing in for all 177 members of the Illinois General Assembly and first day of the 2023 Spring legislative session.
- February 15 – Governor's State of the State and Budget Address.
- May 19 – Adjournment for Spring legislative session.



2023 Virtual Series: Psychiatry in the 21st Century.

First Session: January 26
Advances in Therapeutic Neuromodulation
Guest Speakers:
Jeffrey I. Bennett, MD, LFAPA and
Philip G. Janicak, MD

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IPS 2022 Annual Meeting: The Return of In-Person Events

By: Jasleen Singh

After a long era of virtual meetings and events, the 2022 IPS Annual Meeting marked the return of in-person gatherings. This year the meeting was jam-packed with multiple events for members of all levels - including medical students to retired practitioners and everything in between!

The meeting was held on a crisp fall day in quite a scenic venue - Oakbrook Hyatt. Who would have known that after a couple of turns off of busy town roads, one would encounter an open and modern building with giant windows, surrounded by fall foliage and ponds with ducks floating by.

Options were provided for members to attend the full day or just a portion of it, to allow flexibility. Upon entering, members were able to pick up their badge, grab some IPS swag (who *doesn't* love brain shaped stress balls?) and drop off coats in the donation box by the welcome table. This year, IPS decided to also include a charity winter coat drive to benefit Street Samaritans, an organization who helps those experiencing homelessness in the Chicagoland area. Those who arrived in the morning were able to enjoy a continental breakfast, mingle with other members, and check out the career fair. The career fair included multiple tables on malpractice insurance, different career opportunities, and of course, SWAG!

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"Real Talk" Session on Telehealth with Psychiatric Trainees

By: Jasleen Singh

The IPS Resident-Fellow Committee has continued to feature "Real Talk" sessions during their meetings every 1-2 months, in order to allow residents and fellows the opportunity to learn from attendings with diverse backgrounds and engage in informal but informative discussions. This October, IPS Past President Dr. Hossam Mahmoud was the guest speaker invited to share his experiences with psychiatry trainees.

Dr. Mahmoud discussed his experiences working in inpatient, consult/liason, and outpatient settings, practicing both in-person and via telepsychiatry, as well as practicing within the US and Canada. As current Regional Chief Medical Office at Beacon/Elevance, he shared how he oversees a large healthcare team that supports behavioral health programs in several states. He also noted a goal to increase access to high quality behavioral health services nationally and shared his wisdom and expertise.

The use of telehealth has gained momentum since the COVID-19 pandemic. Whether through the use of iPads and phone interviews for patients with COVID or illnesses on medical floors, virtual telehealth sessions in outpatient practice, or even incorporated into hybrid settings, it is now a part of psychiatric practice and training.

Dr. Mahmoud also educated trainees on the Ryan Haight Act, noting current and future implications. He discussed how this act mandated prescribers of controlled substances to have at least one in-person visit with a patient before e-prescriptions for controlled substances could be sent to pharmacies. During the public health emergency that was declared during the COVID-19 pandemic, this in-person evaluation requirement was waived, in order to ensure that patients could still receive medications. However, as time has passed, the timeline for these waivers is up in the air, with a potential future impact on access to services and medications for patients and noted impact on the future practice of telemedicine.

Of note, Dr. Mahmoud's expertise and passion for telehealth is an ongoing endeavor. He is noted to have a recent publication: "Essentials of Telebehavioral Health: A Practical Guide" where he collaborated with several other authors with first-hand experience in telebehavioral health in order to create this hands-on guide that delves into the "programmatic and clinical aspects" of how to "set up and maintain" a telehealth practice (Mahmoud et. al., 2022).



**But, What Will People Say?:
An Experience Tackling
Cultural Biases against
Mental Health**



**The Role of Biomarkers in
Predicting and Managing
Post-Traumatic Stress
Disorder (PTSD)**

“Log kya kehenge” simply translated from Hindi means “what will people say?” but the subtleties that lie in the cultural context of this phrase also imparts shame and disapproval on those seeking refuge for their mental health illnesses. I have heard this response many times while inquiring about how patients are feeling at the Indian American Medical Association Charitable Foundation free clinic over the past seven years. The population at this clinic is majority those of South Asian descent who are immigrants without insurance and access to healthcare. I have been volunteering as a translator and subsequently a medical student doctor

for these patients, and I have always tried to make it a point to ask the patients how they are feeling about whatever they have shared is going on in their lives. Although we are often stretched thin for time during the scheduled 15-minute appointments, this is their only contact with a healthcare professional, or oftentimes anyone not in their immediate family, for months at a time.

Mental health is a taboo topic in South Asian culture, something I have experienced firsthand in my own life as well as observed when working with patients.

[MORE](#)

Post-Traumatic Stress Disorder (PTSD) is a debilitating disorder with a lifetime prevalence as high as 6.8% that can also present with substance abuse, mood, anxiety, and personality disorders^{8,12}. Given the prevalence and severity of PTSD, global efforts have been made to discover novel methods to help diagnose and treat this condition, one of which is biomarkers. This is a broad category of objectively measurable indicators that can provide information on disease existence and severity¹. Within the field of psychiatry, there are a few categories of biomarkers that have been identified to be potentially useful in managing PTSD: Neurosteroids, Inflammatory Mediators, and Neurotrophic proteins^{1,5}.

The first major category of biomarkers is Neurosteroids. One study investigated allopregnanolone and pregnanolone reactivity in previously-deployed military personnel treated for PTSD⁸. Researchers found higher baseline allopregnanolone/pregnanolone was associated with quicker reduction in PTSD symptoms, consistent with existing literature⁶. The implications of this study are that 1) baseline allopregnanolone in patients predict remission speed and prognosis outcomes and 2) therapeutics involving allopregnanolone may be developed to supplement existing PTSD treatment options. Current research efforts involve investigating the use of such therapeutics in animal models¹⁰.

[MORE](#)



Member Spotlight: Dr. Adrienne Adams

In this spotlight, Dr. Sudhakar Shenoy, Council Member and Chair of the Early Career Psychiatrists Committee, interviews Dr. Adrienne Adams who is a proud IPS member and the Medical Director at Rosecrance, Griffin Williamson campus.

Question: Dr. Adams, thank you so much for doing this interview with me. You know, I have always had this dream of role-reversal and asking a training program director this question that I have gotten asked at every residency/fellowship interview: (smiling and grinning) Can you tell me about yourself?

Answer: Ha! I like it. Okay, I am a native of Detroit and a Midwesterner. I graduated from Oberlin College in Ohio for undergrad, I completed medical school at Wayne State University in Detroit, MI and moved to Chicago for my psychiatry residency training and child psychiatry fellowship training at UIC here in Chicago. I worked at Rush University from early to mid-career. I now work at Rosecrance Health Network, as Medical

Director of Rosecrance Griffin Williamson campus for the adolescent residential facility.

Question: Can you tell us a little about Rosecrance and your role there?

Answer: Rosecrance is a private, not-for-profit health network organization that is comprised of outpatient, IOP/PHP, residential, crisis treatment for youth and adults within several states. My program focuses on residential treatment and highly structured programs in the field of mental health and co-occurring substance use disorders (SUDs) in children and adolescents. It has been around for over 100 years, initially as a clinic for Civil War soldiers, and at some point, as an orphanage for boys in the 1950s, to its current form providing psychiatric care and wraparound services. My role there includes both clinical seeing patients with both acute and chronic mental health conditions, but more importantly complex patients with co-occurring SUDs. Administratively, I also oversee programs that are specifically built around DBT providing evidence-based treatment for mental health issues, co-occurring SUDs and chronic suicidality and the development and implementation of evidenced based programming. I have been there for about 1 and a half years now.

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Navigating the Realm of Private Practice

By: Jordan Romero, MD

During this year's annual meeting, Dr. Jordan Romero, MD was part of a panel session that covered tips for interviewing for residency/fellowship programs, contract negotiation logistics, and considerations for different settings when looking for a job. Medical students, trainees, early career psychiatrists, and even seasoned psychiatrists joined in on this session and participated in interactive discussion. For those who were unable to attend, or interested in a refresher, Dr. Romero compiled a list of questions and factors to consider when interviewing with a private practice based on his experience:

1. Where does the practice receive referrals/patient base from?

Note: This could be from primary care physicians, therapists, hospital systems, PHP/IOP programs, insurance websites, online search engines, etc. Proportions of patients from different referral sources will give you insight into how integrated the practice is in the community.

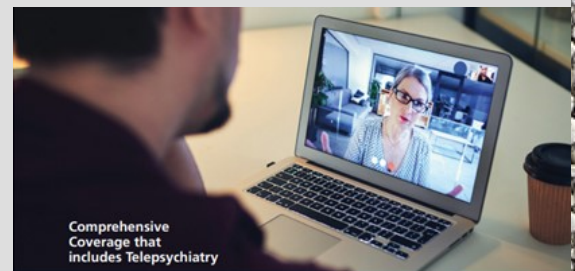
2. What are the payment sources for the patient base?

Note: This could include self-pay, Medicare/Medicaid, Private Insurance. Proportion of reimbursement from various sources will affect your take-home pay, unless you are a salaried employee. Keep in mind that different private insurance companies reimburse at different rates.

3. Will you be a salaried employee, or will you receive a split/percentage of the gross revenue (70/30, 60/40, etc.)?
(Each arrangement has its advantages/disadvantages)

4. Ask to see an anonymized example of another Psychiatrist's reimbursement summary.

Note: This could include hours billed, amount billed to insurance, amount reimbursed by insurance, amount



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“adjusted”/written off/not able to be collected by insurance.

5. Will you be a W2 employee, or a 1099 employee?

Note: W2 means you are employed by the practice, whereas 1099 means the practice has hired you as an "Independent Contractor". In a W2 arrangement, the practice will provide you with an income and specified benefits (Health, Dental, Vision, Disability, Liability, Life, 401k, PTO, CME Days/reimbursement). In a 1099 arrangement, the practice will typically provide you with a higher gross income, but you will be responsible for purchasing your own benefits as well as paying more tax on your income. 1099 arrangements transfer tax burden from the practice to the "independent contractor".

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