

# Oklahoma Psychiatry

OKLAHOMA PSYCHIATRIC PHYSICIANS ASSOCIATION  
A DISTRICT BRANCH OF THE AMERICAN PSYCHIATRIC ASSOCIATION

April, May, June 2022

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Joseph Michie, MD  
Art Rousseau, MD  
Haiwang Tang, MD  
Ashley Walker, MD

## OPPA Membership/Business Meeting News and Awards

The OPPO Annual Business and Membership Meeting was held on May 7 via Zoom teleconferencing. The meeting gave us the opportunity to recognize members who have advanced in membership status, welcome newly elected officers and councilors, honor the recipients of the Exemplary Psychiatry Student Awards, and catch up on legislative issues discussed during the final days of the Oklahoma Legislative session.

## OFFICERS AND COUNCILORS

Newly elected Officers and Councilors for 2022-2023 are **Britta Ostermeyer, MD, MBA, DFAPA**, President; **Tessa Manning, MD**, President-Elect; **Robyn Cowperthwaite, MD**, Vice President; **Rachel Dalthorp, MD**, Secretary; and **Jed Perdue, MD**, Treasurer. **Harold Ginzburg, MD** and **Shree Vinekar, MD**, will serve as APA Assembly Representatives. **Jenny Boyer, MD**, has graciously agreed to serve as the Legislative Representative and **Shree Vinekar, MD**, will continue as Parliamentarian. The Councilors for the 2022-2023 period are: **Shannon Thomas, DO**; **Jason Beaman, DO**; **Harold Ginzburg, MD**; **J. Bryan Cates, DO**; **Hashib Faruque, MD**; **Heather Geis, MD**; **Joseph Michie, MD**; **Art Rousseau, MD**; **Haiwang Tang, MD**; and **Ashley Walker, MD**.



Britta Ostermeyer, MD, MBA  
Incoming OPPO President

## EXEMPLARY PSYCHIATRY STUDENT AWARDS

This year we celebrate the 55th anniversary of the Oklahoma Psychiatric Physicians Association's Medical Student Awards. In 1967, the Oklahoma District Branch of the American Psychiatric Association established what was originally named the Benjamin Rush Award. This award was renamed the Exemplary Psychiatry Student Award to better recognize outstanding medical students in the field of psychiatry in the graduating classes of Oklahoma's medical schools. This award distinguishes each recipient as an exemplary student and honors the outstanding accomplishments each has made during his or her four years of medical school study. When the first award was presented, Dr. Jay Shurley, Oklahoma District Branch President, stated in part:

" . . . Capacity for, and talent in the unique skills required by the practice of psychiatry, is a special gift not evenly distributed among the population of our future physicians and not possessed in equal measure by them.

(continued on page 2)

## Exemplary Psychiatry Student Awards (continued from Page 1)

“Whether the student upon whom this award is bestowed in recognition of his (or her) demonstrated excellence and interest in psychiatry chooses eventually to pursue specialization in this field, is of course, a personal decision to make. But this award indicates that such a choice would be widely open.”

The Oklahoma Psychiatric Physicians Association has the privilege of honoring two medical students as recipients of the 2022 Exemplary Psychiatry Student Awards. Each will receive a certificate and a \$250 cash award. It is an honor to recognize:

**Aston Gores, MPH**, outstanding medical student in psychiatry from the University of Oklahoma School of Community Medicine, Tulsa.

**Landon Hester**, outstanding medical student in psychiatry from the University of Oklahoma College of Medicine, Oklahoma City.

**Aston Gores’** nomination letter for this award related that: *“Ashton Gores was a pleasure to work with and an asset to the treatment team. She was always eager to help and worked hard to understand the complexity required to care for mental health patients complicated by a host of social issues. Ashton’s attitude and demeanor when working with the treatment team and bedside manner with patients was stellar. Her interviews were not only thorough but compassionate as she always patiently listened to her patients and made sure their needs were met. She has all the personality attributes that are needed and cannot be taught, I’ve no doubt Ashton will continue to develop into a great clinician. The Department of Psychiatry faculty feels that she will be an excellent physician and are delighted to nominate her for this award.”*



**Ashton M. Gores, MPH**



**Landon Hester**

**Landon Hester’s** letter noted: *“Landon Hester’s comments from site supervisors were stellar. “He is motivated to go above and beyond to understand disease pathology and options; hard-working and dedicated to bettering his understanding of psychiatry. Landon is motivated to do psychiatric research and has taught himself about the process of conducting research and producing publications and is very interested in statistical analyses of data. Furthermore, Landon has volunteered to facilitate a group therapy, assist his faculty and fellow students in scholarly activities, and serve as the first medical student Associate Editor of the Journal of the Oklahoma State Medical Association.”*

# CONGRATULATIONS

## Membership/Business Meeting News and Awards

### PRESENTATION OF RECOGNITION PLAQUE TO DR. ART ROUSSEAU

**A**s many of you know, Dr. Art Rousseau has announced his intention to retire in July, 2022 from practice and from his duties as the OPPA Legislative Representative (see his letter, below). In recognition of Dr. Rousseau's longstanding contributions service to OPPA and to the practice of medicine in Oklahoma, the Executive Council and Membership presented a commemorative plaque of appreciation to Dr. Rousseau inscribed, *"In honor and with deep appreciation for your longstanding distinguished commitment, service, and outstanding leadership. Your wisdom and dedication have been a solid block in our foundation."*

To my Patients, Colleagues, Friends and Associates,

In July of 2022, I will have been in the private practice of psychiatry for forty years. With a lot of thought and prayers as well as many discussions with my patients, family and friends, I have decided that I will retire from my practice at that time.

During my professional career, I have participated in several different roles as a psychiatrist. Along with my private practice, I have worked with teaching institutions instructing residents and medical students in the practice of psychiatry. My goal has always been to try to give back some of what I was so generously given during my training as I developed my identity as a psychiatrist. I have been extremely blessed to have had all these wonderful opportunities to serve others.

**Art Rousseau, MD**



The Oklahoma Psychiatric Physicians Association, The Oklahoma State Medical Association and other mental health organizations have allowed me to participate in other aspects of mental health and medicine in general. Thank you for the opportunities to shape the practice of medicine in Oklahoma. It is my hope that I have always maintained the role of a mental health advocate and provided support for individuals in need of all forms of health care.

To all my patients, thank you for allowing me to be a part of your lives. Trusting and having faith in me to assist you through your struggles has been the highest honor and privilege that one can bestow upon

another human being. It has only been through God's help that I have been able to assist you. I realize that my retirement may be difficult for some, but I also have faith and trust in each of you that you will continue to move forward and be successful in your future goals.

Over the next year, some of you may have questions and concerns regarding your future psychiatric treatment or how to continue to pay an outstanding bill. Please feel free to contact my office or discuss with me your concerns. We will make every effort to assist you in any way possible. During this next year, I will also work with all the organizations in which I have participated to assist in transitioning my leadership roles to the next generation.

With all my thanks and deep respect,  
Art Rousseau, M.D.





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**C**ongratulations to [Aisha Gillan, MD](#), who was recently awarded a Diversity Leadership Fellowship from the American Psychiatric Association and the American Psychiatric Association Foundation for 2022-2024.

The APA/APAF Diversity Leadership Fellowship identifies and motivates minority psychiatry residents or those interested in minority and vulnerable populations who, through the experiential and training opportunities of the fellowship, will become well equipped to teach, administer, and provide culturally competent, evidence based mental health and substance abuse services to diverse minority groups and at-risk populations. These populations include—but are not limited to—American Indians/Native Alaskans, Asian Americans/Native Hawaiians/Native Pacific Islanders, Blacks/African Americans, Hispanics/Latinos, LGBTQ, and religious minorities.

Dr. Gillan is currently a psychiatry resident at The University of Oklahoma Health Sciences Center in Oklahoma City and is set to graduate in 2024. Her professional interests include consultation-liaison psychiatry, driving educational initiatives to improve diversity and cultural competency in psychiatry, increasing physician representation in business administration roles, and general advocacy for her field. She is also currently pursuing her MBA through The University of Oklahoma, and hopes to utilize that along with her fellowship appointment, to better position herself to influence systemic change in medicine. Outside of work, she enjoys spending time with her dog, bingeing TV shows of all genres, exploring new restaurants with friends, attending concerts, and focusing on her health through Pilates and weight-lifting. ❖



### **New APA membership resources are coming your way!**

Please watch your email for updates to your APA membership account! You will be asked to create a new login to access your updated membership benefits.

**June 30-July 7:** During the database update, renewal and membership payments will be taken by telephone only.

**July 11:** Email communication to members to watch for password reset email.

**July 12-14:** Automated email to members for password reset ([link will only be good for 24 hours](#)).

NEW applications will be reviewed and processed as usual during this update period and all updates for Resident Members to advance to General Membership will also be done at this time.

For issues and questions? [apa@psych.org](mailto:apa@psych.org)

## Editorial Corner

*Harold M. Ginzburg, MD, JD, MPH*

Most of us watch television. Most of our patients watch television. Television can provide knowledge and entertainment. Some programs are fact, and some are fiction and some, like commercials, make it difficult to tell where the border is. The American Psychiatric Association's Assembly met in May, in New Orleans, at the beginning of the annual meeting. The Assembly, this year, dealt with an issue that generated an exceptional amount of interest and controversy. A copy of the final action paper is provided at the end of my comments. The American Medical Association House of Delegates passed very similar proposed action in June, 2022.

The controversial issue was advertisements for "Medicare Advantage" programs which are private insurance programs that replace Medicare, not supplement it. These proprietary programs, which vary by company and the geographic location of the patient, which is why the ads ask individuals to have their zip codes 'checked', requires the patient to forego actual Medicare coverage. There is a debate as to whether these proprietary programs are better or not as good for any given individual, depending on the scope of services offered, the numbers and type of physicians and other health care providers who participate in any given program, and the actual medical and mental health needs of the patient. Current advertisements do not address these variables in a manner in which patients can assess their individual circumstances.

The goal of the Action Paper, and my comments, is to make clinicians and thus their patients aware of the differences between Medicare and Medicare Advantage as it relates to mental health and medical needs, since it is generally accepted that our patients have more medical needs, and the need for more medical and related services, than those patients without mental health needs.

The Action Paper is a call to action and thus, it is suggested that OPPA, with OSMA and OOA, and sister health-related organizations consider developing a community-based educational program to educate those who are eligible for Medicare, on Medicare or who have changed to Medicare Advantage.

Your thoughts and comments are most welcome.

**A1 14.A - Assembly May 20-22, 2022**  
**ACTION PAPER—FINAL**

**TITLE:** Establishment of a Work Group to Formulate an American Psychiatric Association Response to Concerns About Potential Negative Consequences of "Medicare Advantage" Programs for Patients with Mental Illnesses

**WHEREAS:**

- Psychiatrists treat two groups of patients who are eligible for Medicare coverage: Older patients with mental illnesses who statistically have higher general medical needs than the elderly without comorbid mental illness, and younger patients with mental illnesses so severe and persistent that they are on disability and have been so for more than two years.
- "Medicare Advantage" is not Medicare. It is a proprietary insurance product the acquisition of which requires the patient to forego actual Medicare coverage.
- If an individual registers with Medicare at age 65, they pay a set premium which may be increased for all participants periodically. If the individual does not register for Medicare until they are older than 65, they will pay a higher premium for the rest of their life. If they switch to "Medicare Advantage" and then recognize its disadvantages for them and switch back to "real Medicare," they do not go back to their original premium, but rather will have the premium they would pay if they had not started Medicare until

*(Continued on page 7)*

## Editorial Corner

(continued)

their now current age and

pay this higher premium for the rest of their life. This reality is not clearly delineated in "Medicare Advantage" solicitations.

- The percentage of patient premiums used by Medicare for administration is low since they do not require an extensive workforce engaged in the denial of care. Proprietary "Medicare Advantage" plans have high administrative costs driven by their need for a workforce focused on care denial, the existence of high advertising costs, and the amount they retain as profits. This substantially higher amount used by "Medicare Advantage" plans for these non-patient care diversions are overwhelming derived by one mechanism, treatment denials. As we know, the need for mental health parity laws to exist is driven by the practice of proprietary insurance entities targeting this politically and economically vulnerable population for such treatment denials.
- In their advertisements, proprietary "Medicare Advantage" programs tout their large provider networks and promise potential customers that they will be able to "keep their doctors." In fact, APA research has demonstrated a strikingly high occurrence of false provider networks. The reality being that if a patient cannot find a network "provider," the plan pays much less or nothing.
- Patients are being bombarded with multimedia advertising for these proprietary "Medicare Advantage" plans (using the name Medicare) with little access to the clarification that these plans are not Medicare and have significant disadvantages for many individuals with a mental health disorder.
- Medicare has seemed to not have responded to proprietary insurance entities using the word "Medicare" in their product names, creating the impression that Medicare may wish that, in the face of increasing longevity, patients not be on the role of Medicare, or at least have a higher premium because they were, even briefly, on an alternative option.

### BE IT RESOLVED:

- That the American Psychiatric Association establish work group to formulate an APA response to the incomplete and misleading information being disseminated about "Medicare Advantage" by proprietary insurance companies which negatively impacts many Medicare patients including our often most vulnerable patients and patients whose healthcare is an employee benefit through group retirement plans.
- That the work group will be established as soon as possible and will complete its work not later than six months from the establishment of the work group and provide their findings and recommendations to the Assembly.
- That district branches of the APA at the local level, be provided resources to encourage practicing psychiatrists to help educate their patients about the risk of their being given misleading or incomplete information about the potential advantages of "Medicare Advantage" products.

AUTHOR: John Shemo, MD, Representative, Psychiatric Society of Virginia

ESTIMATED COST:

APA: TBD

ENDORSED BY: Area 5 Council

KEY WORDS: Medicare Advantage, Medicare, Proprietary Health Insurance Products

APA STRATEGIC PRIORITIES: Advancing Psychiatry

REVIEWED BY RELEVANT APA COMPONENT



## LEGISLATIVE UPDATE

### REGULAR SESSION ENDS/SPECIAL SESSIONS CALLED

### ART ROUSSEAU, MD / OSMA



The 58th Session of the Oklahoma Legislature has come to a close. Irrespective of Medicaid privatization through the incorporation of insurance based managed care, the medical community and physician profession had a tremendously strong session.

A significant issue needing to be addressed this session was replacing “medical power of attorney” language back into the statute. The language was mistakenly repealed last year. This was accomplished with the passage of SB 1596 (Howard/Stinson).

Some other highlights of this session include:

- No distinctive “scope of practice” measures were passed
- Stopped measure allowing PA oversight from unlimited number of physicians
- Defeated legislation allowing PT’s to provide unsupervised diagnosis and treatment
- Stopped measure allowing pharmacists to conduct screening tests without physician authorization
- Defeated legislation allowing chiropractors to inject drugs, serums or vaccines
- Stopped all anti-vaccination measures
- Stopped measure allowing contagious children to attend school
- Defeated effort to eliminate OSMA input and vetting of prospective members to the Medical Licensure Board
- Created statutory Chief Medical Officer (CMO) position at OSDH
- Passed insurance coverage requirement for breast diagnostic exams
- Supported measure to allow Licensure Boards to provide temporary licenses to health care practitioners/providers upon an emergency declaration

With regards to Medicaid reform, SB 1337 (McCortney/McEntire), designed to “privatize” Medicaid by incorporating managed care insurance administration, was signed into law this week. The measure provides that the Oklahoma Health Care Authority (OHCA) shall award no less than three statewide Medicaid “capitated contracts” for “contracting entities” and/or “Accountable Care Organizations” (i.e. provider networks). These will cover the Medicaid expansion population; pregnant women, children, newborns and parents & caretaker relatives. Contracts will become effective no later than October 1, 2023. Due to OSMA’s coalition building, diligence and discussions with the bill’s authors, several pro-physician provisions were included in the final measure. Those items include:

- An “anti-discriminatory” provision requiring plans to offer contracts to independent practitioners not affiliated with a hospital network
- Clean claims to be paid within fourteen (14) days
- Plans shall meet all established prior authorization requirements
- Standardized drug formulary for all plans
- Physicians and providers may contract with multiple plans
- After the fourth year of the initial contracting period, each plan shall spend a minimum of eleven percent (11%) of its total health care expenses on primary care services

*(Continued on page 9)*

The companion bill, SB 1396 (McCortney/Wallace) providing the funding mechanism through the Supplemental Hospital Offset Payment Program (SHOPP), was also signed by the Governor. OSMA was neutral on that measure.

In additional news from the Capitol, the legislature initiated a "Special Session" last week designed to help the Governor prioritize the \$1.8 billion in federal "American Rescue Plan Act" (ARPA) stimulus funds. The Special Session is currently ongoing and is expected to continue in the late summer or early fall.

In response to the \$9.8 billion budget sent to his desk, the Governor, in turn, line-item vetoed a handful of budget items and called his own "Special Session" to be convened on June 13, the middle of primary campaign season. He expressed his disappointment that the budget did not include an elimination of the state's grocery tax (which was seriously considered by the legislature this year) or a significant reduction in the state income tax. All the Governor's budget vetoes were overridden.

## LEGISLATIVE ISSUES IMPORTANT TO OSMA

### MEDICAID MANAGED CARE

**SB 1337 (McCortney/McEntire)** – Language drafted by the Oklahoma Health Care Authority (OHCA) allows for the creation of capitated Medicaid health insurance plans was filed this week. Sen. McCortney and Rep. McEntire continue to work with OSMA on language favorable to the state's Medicaid patient population as well as physicians and other medical providers (Conference Committee Report Adopted; Passed Senate; Passed House; Signed by Governor) **OSMA OPPOSES**

### LEGAL REFORM

**SB 1596 (Howard/Stinson)** – Creates the Oklahoma Health Care Agent Act which establishes standards and procedures for adults and emancipated minors to designate medical power of attorney to an agent should they become medically incapable. The measure restores stricken language from last year which mistakenly repealed provisions dealing with a power of attorney for health care. (Passed Senate; Passed House; Signed by Governor) **OSMA SUPPORTS**

### GENERAL GOVERNMENT

**HB 2776 (Pfeiffer/Montgomery)** – Creates the Health Care Workforce Development and Finance Act for recruiting & educating the state's health care workforce and directs the Health Care Workforce Training Commission to administer the loan repayment program. (Revises and updates Physician Manpower Training Commission (PMTTC) (Passed House; Passed Senate; Sent to Secretary of State without Governor's signature) **OSMA NEUTRAL**

**HB 3319 (Miller/Haste)** – Permits the boards of nursing, osteopathic examiners, and medical licensure and supervision, to grant a health care provider a temporary license when an emergency has been declared by certain entities and provides guidelines for the license (Passed House; Amended and Passed Senate; back to House to consider Senate Amendments; House concurred with Senate Amendments; Signed by Governor) **OSMA SUPPORTS**

**SB 709 (Rosino/Roe)** – Provides that the State Commissioner of Health serves at the pleasure of the Governor and is exempt from certain qualifications so long as they hold at least a master's degree and certain related experience. AMENDED TO INCLUDE THE STATUTORY CREATION OF A CHIEF MEDICAL OFFICER (Passed Senate; Passed House as Amended; Senate Passed with House Amendments; Signed by Governor) **OSMA SUPPORTS**

## Legislative Update (Continued from page 9)

**SB 1322 (Pugh/Martinez)** – Permits physician assistants operating under certain practice agreements to sign death certificates and take other related actions; amended to restate when PA's can prescribe narcotics (Passed Senate; Passed House; Signed by Governor) **OSMA OPPOSES**

### **INSURANCE**

**HB 3504 (Provenzano/Stanley)** – Requires all health benefit plans provide coverage for certain breast cancer diagnostic examinations (Passed House; Passed Retirement & Insurance Committee; Title Stricken\*; Passed Senate as amended; Back to House to consider Senate amendments; Passed House; Signed by Governor) **OSMA SUPPORTS**

### **MENTAL HEALTH**

**SB 1307 (Coleman/Vancuren)** – Requires schools that issue student identification cards to include numbers for the National Suicide Prevention Lifeline and the Crisis Text Line and permits higher education institutions print similar information on student IDs (Passed Senate; Passed House Floor; Signed by Governor) **OSMA SUPPORTS**

**SB 1413 (Montgomery/Sneed)** – Directs the Insurance Department to conduct a market conduct examination to analyze certain limitations on mental health parity by health providers. (Passed Senate; Passed House Public Health; Passed House Floor as Amended; House concurred with Senate amendments; Signed by Governor) **OSMA SUPPORTS**

### **WOMEN & CHILDREN HEALTH**

**HB 4327 (Stearman/Daniels)** – Permits individuals to bring certain civil actions against any person who performs or assists in the performance of an abortion in any way. (Passed House; Passed Senate Floor as amended; Passed House; Signed by Governor) **OSMA OPPOSES\*\***

**SB 612 (Dahm/Olsen)** – Relates to abortion by imposing a fine or prison sentence on any person purposely performing an abortion except to save the life of the mother (Carry over bill from 2021; Passed Senate; Passed House; Signed by Governor) **OSMA OPPOSES\*\***

**SB 1100 (Bergstrom/Dills)** – Limits the designation of a newborn's gender on birth certificates to only male or female and specifically prohibits nonbinary designations (Passed Senate; Passed House, Signed by Governor) **OSMA OPPOSES**

**SB 1503 (Daniels/Russ)** – Creates the Oklahoma Heartbeat Act which disallows abortion if a fetal heartbeat is detected and allows certain individuals to bring civil action against certain persons they know to have performed or undergone an abortion (Passed Senate; Passed House Public Health; Passed House; Signed by Governor) **OSMA OPPOSES\*\***

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*\*\*OSMA understands the moral implications of the abortion issue; however, as long as the practice remains permissible at the federal level, OSMA opposes the criminalization of this legal medical procedure.*

*\*Title Stricken means the language in the measure continues to be in a drafting stage and a work in progress.*



# *Congratulations 2022 Psychiatry Resident Graduates*



## **University of Oklahoma College of Medicine, Oklahoma City**



Theodore  
Brisimitzakis, MD



John Harvey, MD



Alexandra Rossi  
Gotsche, MD



Margaret Lee, MD



W. Caleb Wilson, MD

## **University of Oklahoma, School of Community Medicine, Tulsa**



L-R: Alyx Bui, DO; Stephen Gonzalez, MD; Zephan Chen, DO; Zach Davis, DO; Sara Verga, MD (Fellow); and Elizabeth George, DO. Not pictured: Matthew Sharp, DO (Fellow)

## **Oklahoma State University for the Health Sciences, Tulsa**



Remington Gould, DO



Julia Haffner, DO



Nikki Igo, DO



Revanth Madina, DO



Bridgette Staub, DO

# Tulsa Psychiatry Association and Central Oklahoma Psychiatric Association Free CME Webinar Presentations in 2022

## “Medical Leadership”



Britta K. Ostermeyer, MD, MBA, DFAPA  
 Professor and Chair  
 Dept. Psychiatry & Behavioral Sciences  
 College of Medicine  
 University of Oklahoma Health Sciences Ctr.  
 Chief of Psychiatry, OU Health  
 Oklahoma City, Oklahoma

**FEBRUARY 17**

## “Tulsa Life Chart: Web-Based Graphic Representation of the Life Course of Mental Health”

Sahib S. Khalsa MD, PhD  
 Director of Clinical Operations  
 Laureate Institute for Brain Research  
 Associate Professor, University of Tulsa  
 Oxley College of Health Sciences  
 Tulsa, Oklahoma



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Robin Aupperle, PhD  
 Principal Investigator  
 Laureate Institute for Brain Research  
 Associate Professor, University of Tulsa  
 Tulsa, Oklahoma

## JUNE 2

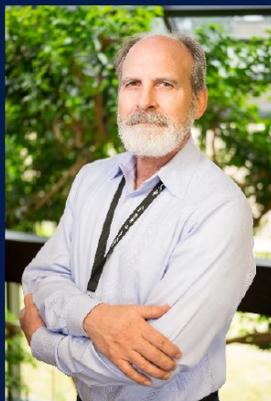
sponsored by the  
 OUHSC Department of Psychiatry and Behavioral Sciences with the Central Oklahoma  
 Psychiatric Society and the Tulsa Psychiatric Association



**Phebe Tucker, MD**

Department of Psychiatry  
 and Behavioral Sciences,  
 University of Oklahoma HSC  
 Oklahoma City, Oklahoma

**“Here We Go Again:  
 The Evolution of DSM-5-TR”**



**Peter Kowalski, MD**

Chief Medical Officer  
 NorthCare of Oklahoma  
 Oklahoma City, Oklahoma

**“Makeshift Medical Care Amid  
 the Mayhem of War”**



**Andrew Liew, MD**

Department of Psychiatry  
 University of Oklahoma-Tulsa  
 School of Community Medicine  
 Tulsa, Oklahoma

**“A Telepsychiatry Simulation for Suicide Assessment:  
 Teaching Telemedicine Safety Competencies”**



**John Laurent, MD**



## June Free CME Course for Members

### **Transgender-Affirming Care: What Every Psychiatrist Should Know**

**E**ach month, APA Members receive **free access** to an on-demand CME course on popular topics. APA is making this activity available to its members as a benefit of APA membership and there is no cost to participate in this activity or to earn CME credit. For ABPN diplomates, access to this program was supported through funding from the American Board of Psychiatry and Neurology (ABPN).

The APA free CME course for June is *"Transgender-Affirming Care: What Every Psychiatrist Should Know."* Modern research reflects that the number of people who identify as transgender or gender diverse (TGD) is greater than what was previously known. Despite this, mental health resources in our communities have not expanded in a way that reflects a commitment to trans-affirming care. Social support and affirmation of gender identity play herein a critical role with regard to trans people developing resilience. Although there is a growing awareness of diversity in gender identity and expression among this population, a comprehensive understanding of biopsychosocial development beyond the gender binary and beyond transition is essential for all psychiatrists to know.

#### **Learning Objectives**

- Identify the neuroanatomical and physiologic variations in transgender people
- Construct practical adaptations for clinical settings that should be instituted universally to be inclusive of transgender patients
- Use straw polling and active audience participation, practice identifying appropriate mental health treatment that is sensitive to transgender people
- Integrate the prevalence of mental health issues with general medical issues in trans people
- Synthesize the biological factors associated with gender incongruence

**Estimated Time to Complete:** 60 minutes • **Date:** June 1, 2022—June 1, 2025



The APA designates this enduring CME activity for a maximum of 1.0 AMA PRA Category 1 Credit™. Physicians should claim only the credit commensurate with the extent of their participation in the activity.

**P**ublic engagement, professional encouragement, and policies that enhance the care of patients—those are the landmarks of the “roadmap for the future” that incoming **APA President Rebecca Brendel, M.D., J.D.**, invited psychiatrists to help chart at the Opening Session of APA’s Annual Meeting on May 21, 2022.

Speaking at the first in-person meeting in three years, Brendel said psychiatrists face enormous challenges in the wake of the global catastrophe of the COVID-19 pandemic, and she called for a moment of silence during her remarks to remember the millions of lives lost.

“Now, as we emerge from pandemic to endemic, let us take a moment to recognize the devastating loss that COVID-19 has left in its wake: more than one million lives lost in the United States alone, and more than six and a quarter million documented lives lost globally, a number that most certainly underestimates COVID-19–related fatalities.”

Introducing her theme for the coming year, **“A Roadmap for the Future,”** Brendel said the pandemic has left in its wake a vast mental health crisis—its own pandemic—while revealing stark inequities in medical and psychiatric care. “Some of the psychiatric consequences of COVID were to be anticipated based on the historical emergence of neuropsychiatric sequelae following widespread outbreaks of viral illness,” she said. “Others, such as the racial disparities in our society laid bare by the pandemic are but one stark example of health inequity in the U.S. and the necessary and painful journey ahead of us to achieve health equity and racial justice.

“The challenges before us—as citizens and as psychiatrists—are daunting,” she said. “Suicide deaths increased in 2021; we lost more than 100,000 Americans to opiate overdose in 2021; and our youth in particular are reporting unprecedented levels of anxiety, depression, and psychological distress.” However, she pointed out, when Americans seek mental health care, they often can’t access it at all or in a timely fashion, and parity remains an elusive goal. Meanwhile, psychiatrists are struggling to practice within a health care system characterized by low reimbursement and administrative burdens. There are far too few psychiatrists to meet the demand, and physicians are reporting high rates of burnout, while the next generation of doctors is facing staggering amounts of debt, she said. In addition, the psychiatric workforce lacks the diversity to provide high-quality, evidence-based care to an increasingly diverse population.

Brendel said the “roadmap for the future” will build on the work of APA presidents who preceded her and will emphasize three broad areas: public-facing activities, activities that support and promote psychiatrists and the profession of psychiatry, and policy initiatives. “APA’s public engagement is critical at this time when Americans are experiencing heightened mental health symptoms and when mental health and wellness have prominence on the national agenda from the White House and the Capitol to state capitals and local government,” she said. “We owe it to ourselves, and to the patients we serve, to ensure that APA and psychiatry are not just a part of the conversation, but drivers of information and treatment of mental health and substance use disorders.”

The current shortage of psychiatrists will only get worse if action is not taken, Brendel said. “We must end the structural stigma of lower reimbursements for psychiatrists for the same services rendered and codes billed by other physicians. We must continue to advocate for patient safety by opposing expansion of prescribing and independent practice to mental health colleagues without medical knowledge, training, and experience, and we must continue to fight discriminatory administrative burdens for mental health care that simply do not exist for medical care.”

“Perhaps charting and implementing this ‘roadmap for the future’ seems too lofty for a one-year term for an APA president,” she said in conclusion. “But we have no choice. There is no greater opportunity to lead and to succeed than in this time of unprecedented need for mental health care and resources. We will have to work hard, we will have to focus, and we will have to be innovative and creative. But there is no more urgent time to rise to the challenge than now. Together, we will succeed.” ❖



## ***OPPA Working for You!***

The ***Oklahoma Psychiatric Physicians Association***, a district branch of the American Psychiatric Association, works hard to keep up with the role healthcare plays in the lives of every person fighting to maintain their physical and mental health, their means of employment to feed and nurture their family, and their personal safety and freedom from fear. At the core of every organization is membership—recruitment and retention.



### **OPPA Membership Update April-June, 2022**

#### **New Members:**

Abid, Humaira MD (General Member)  
 Arthur, Nicole MD (Resident Fellow Member)  
 Camacho, Natasha DO (Resident Fellow Member)  
 Davis, Zachary DO (Resident Fellow Member)  
 Gillan, Aisha DO (Resident Fellow Member)  
 Guinjoan, Salvador M.D., Ph.D. (General Member)  
 Harvey, John MD (Resident Fellow Member)  
 Kowol, Mary-Anne MD (transfer from Wisconsin)  
 Li, Fan DO (Resident Fellow Member)  
 Richardson, Matthew MD (GM) (transfer from Utah)  
 Shah, Kaushal MD (Resident Fellow Member)  
 Starkey, Erica DO (GM)

#### **Reinstatements:**

Ahmad, Massod MD  
 Al-Botros, Adonis MD  
 Armendariz, Francis P., MD  
 Betsch, Brandon R. MD (Resident Fellow Member)  
 Czapla, Christopher MD  
 Jenkins, Jeffrey, MD  
 Koca, Craig MD  
 Lehman, Derek MD, (Resident Fellow Member)  
 Merideth, Alycea MD  
 Watson, Kevin, MD  
 Wilson, William MD (Resident Fellow Member)  
 Yeh, Fei Ling DO

Membership

**Working** through legislative advocacy this past session, we can continue the fight to protect your profession from scope of practice attacks and governmental encroachment on the practice of medicine.

**Connect** with your peers to increase knowledge, decrease isolation, and maintain relationships with colleagues working for issues benefiting Oklahomans.

**Learn** by participating in scientific webinars, seminars, and CME conferences from the comfort of your home or office.

**APA and OP  
MEMBERSHIP RENEWAL  
AND INFORMATION**

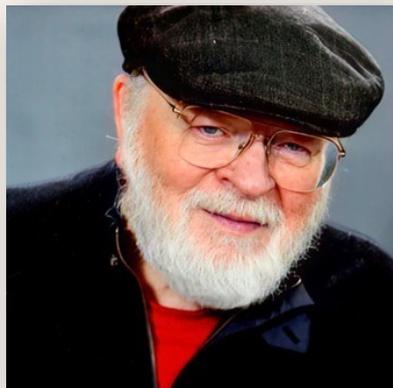


## Dr. Harold Eist: A Profile in Courage

by Shree Vinekar, MD

**Editor's Note:** Harold I. Eist, M.D., DLFAPA, FRCPC, passed away in his sleep on December 16, 2021 at the age of 84. His obituary can be found here: <https://www.legacy.com/us/obituaries/name/harold-eist-obituary?id=31995354>

Harold Eist and I met because of his passion to defend the freedom of psychiatrists to help their patients. He was reading all the newsletters of the district branches and ran into my article titled



“Where is Mind in the Mined Field?” The article described how managed care was a “perfect business, deserving the Nobel Prize for its invention” because there was no other business in which the owner could entirely control the demand and supply, the cost of doing business, and also the profit. In this respect, the astronomical numbers describing the exorbitant salaries of the CEOs of such managed care companies were the evidence that these companies were not motivated to provide economic health care – leave alone true quality of care.

This topic was very close to Harold’s heart and he had already decided to mobilize the membership to oppose managed care. Harold contacted me and many other Presidents of the District Branches, describing his mission to defeat “managed care”; this was why he had run for the Presidency of the APA, although he had not been nominated by the nominating committee.

Thousands of APA members including myself enthusiastically supported him. He was elected by popular support of the members and he tried his best to change those whom he considered basically unethical for getting in bed with the Managed Care Corporations. The belief that psychiatrists have the power to break the banks of these corporations by providing honest care for honest fee-for-service had led to the fear that psychiatry would bankrupt the health industry. He could see through the irrational arguments. Besides, the participants and supporters of managed care seemed to have no respect for the conflict-of-interest principle. While maintaining collegiality, he could adroitly confront his colleagues. His struggle did not result in defeating managed care, but he made a dent in the general apathy.

During his election campaign for Presidency of APA, he and Ann visited nearly every District Branch of APA and patiently listened to the concerns of members with whom he ate dinners and participated in their after dinner dances. He endeared himself to all members at the grass root level. After assuming his position as the President of APA, he announced that his telephone line will be open to any and all members between 12 noon and 1 PM as the “hot line to the President.” Any member could call him. He kept a notebook and kept a record of the concerns and suggestions given by the members with the intention of presenting those to the Board of Trustees of the APA. He was devoted to getting feedback and hoped to give timely responses to the members’ concerns. To my best knowledge, no other President of the APA opened himself directly to all members with a willingness to listen. That was an evidence of his love and caring for all members of APA.

He refused to accept payment from health insurance companies and relied on patients to pay his fees. Those who knew him appreciated his courage. I wanted to nominate him for the Catcher in

*(continued on next page)*

**Dr. Harold Eist: A Profile in Courage** *(continued)*

the Rye Award of the American Academy of Child and Adolescent Psychiatry for providing child psychiatric care for African American Children at Howard University for more than two decades and I brought it up with him. However, he told me that he felt he had already been honored sufficiently by his colleagues by giving him the APA’s Assembly Profile of Courage award for protecting the privacy and confidentiality of patients against the Medical Board. It cost him a fortune, but he did not give up. Finally, he was recognized by his medical school – the University of Edmonton – as a highly deserving alumnus.

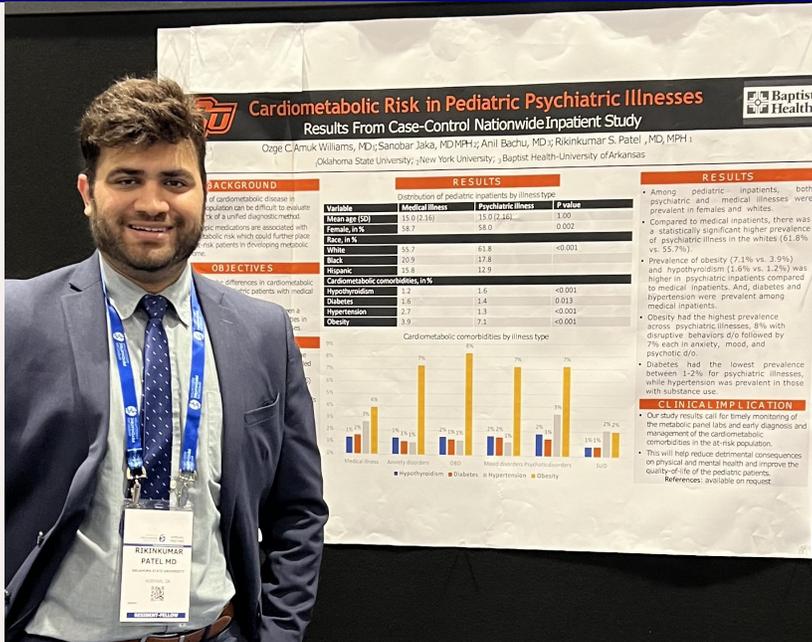
He took up for the patients and for his fellow psychiatrists. We developed a lasting friendship and I invited him many times as our distinguished guest faculty at the district branch meetings, at grand rounds and for our convocations of Residents at the Oklahoma University Health Sciences center. He described how he had learned to offer psychotherapy even to schizophrenic patients under the guidance of “another” Harold -- “Harold Searles.” His clinical skills as an analyst, which he was able to demonstrate in case presentations, were superb.

I must say that after having had the good fortune of entertaining nearly 200 renowned training analysts and psychiatrists as our guest speakers since 1972, Harold was one of the best. The Oklahoma Psychiatric Physicians Association honored him during his visit to the district branch by officially appointing him as the pre-statehood Oklahoma Territorial Marshal with a Sheriff’s badge, decorated belt, and a Sheriff’s hat with a feather. He was thoroughly amused and was proud to be registered in the oldest Capitol of Oklahoma – in Guthrie, Oklahoma – as the honorary territorial Marshal of Oklahoma.

I consider myself very fortunate to have had the opportunity of working with him. He made my participation in APA more enjoyable and meaningful. My wife and I will miss him sorely, as just about no other psychiatrist we have known showed as much enthusiasm for psychiatry and psychoanalysis as Harold did. ❖

**PATEL RECEIVES RESIDENT TRAVEL AWARD**

Congratulations to Rikin Patel, MD, MPH, on receiving an OP-PA 2022 Resident Travel Award for his poster presentation entitled, “Cardiometabolic Risk in Pediatric Psychiatric Illnesses,” presented at the recent 2022 American Psychiatric Association meeting in New Orleans, Louisiana.



## Oklahoma Psychiatry

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**M. Lynn Montgomery, Director**

*Oklahoma Psychiatry is a publication of the Oklahoma Psychiatric Physicians Association. The Oklahoma Psychiatric Physicians Association, a district branch of the American Psychiatric Association, is a medical specialty society specializing in the diagnosis and treatment of mental and emotional illnesses and substance abuse disorders.*

**Save the Date**  
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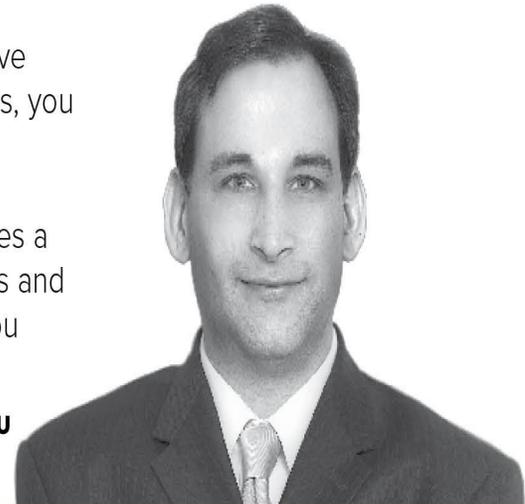
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