Message from the President—
Q: Meds or Therapy?  A: Yes

How many times have we, as psychiatric physicians, been asked this question? It is as if there is an established standard of care in the world of organized care delivery, public and private. We have a binary choice: delivering “meds,” often for 10 minutes a month, or “therapy” for 50 minutes a week. Would a neurologist be asked such a question for a person with a complex seizure disorder that affected the life of her or his patient? Would an internist be asked this about a patient with unstable diabetes or hypertension? Would an oncologist be expected to administer chemotherapy and not address other aspects of cancer care?

The truth, in my opinion, is that psychiatry is a semi-primary care specialty. For many patients with psychiatric illness, we are the physicians that they see most frequently. Care for each patient must be individualized according to the nature of their illness and the psychosocial variables which confront them. I believe that we have inherited a model which began in the era of community psychiatry. In order to work more efficiently, tasks were divided between psychiatrists and other mental health professionals who usually worked together in an integrated setting. This model has been applied (misapplied, in my view) to the current system of care which is often far more decentralized and in which coordination of care is more difficult. Most patients with medical/psychiatric needs do not fit either of these choices, meds or therapy. They have need of skilled, considered psychiatric diagnosis and medical/psychiatric treatment that is tailored to their individual need. Most patients, I believe, find the 10 minute “med check” visit to be unsatisfying. On the other hand, many do not need or want more intensive weekly therapy of the classic type. It seems to me that we need to advocate for a more flexible system of care which is centered on the needs of patients rather than the needs of the care delivery system.

As we make the rounds of residency programs to talk about MPS, I am struck with the enthusiasm and broad range of interests of the next generation of psychiatrists. As we have discussed their transition to practice, they are uniformly relieved and excited to hear that there is an alternative to “meds or therapy.” They know that their “psychopharm patients” have more complex needs than “just meds.” Most of them have entered the profession in order to combine their medical skill with psychological knowledge.

At MPS, we have been addressing this set of issues in a variety of ways. The Managed Care Committee has been pressing insurers to allow more flexible authorization procedures for psychiatrists. We have been advocating for the expanded use of Evaluation and Management (E&M) codes which are used by other medical specialists to bill for services based on complexity and decision making rather than simply on the basis of time. We feel that our future is stronger when we work in tandem with organized medicine and have supported the Massachusetts Medical Society in issues such as adequate regulations of “minute clinics” and in return have received support for issues such as parity (Continued on page 2)
President’s Message—continued from page 1

and outcomes measures. Our CME programs are independent and stress the medical roots and complex nature of psychiatric practice. We will continue to advocate for an environment which encourages a patient centered approach to psychiatric medicine, which allows psychiatrists to provide the care needed by each individual patient.

Commissioner of Mental Health Barbara Leadholm attended our October Council Meeting. She has had extensive experience in Massachusetts at DMH, in the clinical world and in the insurance sector. We were very pleased that she came to meet with us and found her to be open and forthcoming. While we are aware that budgets are still tight, and we may not always agree, we look forward to consultation and collaboration as we move forward.

We are delighted that Don Condie was appointed by Jeff Bostic, President of the New England Council of Child and Adolescent Psychiatry, to be non-voting representative to the MPS Council. Don is a Past President of the New England Council of Child and Adolescent Psychiatry (NECCAP) and has had long and varied experience in child psychiatry. We look forward to greater coordination between our organizations. We also plan to add a non-voting representative to Council to be liaison to Mass. Medical Society and would like to hear from our members who are also MMS members and who would be interested in filling the MPS position at the MMS House of Delegates and who would be interested in liaison work between MPS and MMS.

This month, MPS participated in hearings at the State House on parity, impaired driving and emergency department regulations. Thanks to David Hartnett and Jim Ellison for a great job at the driving hearings and to David Gitlin and 4th year UMass resident Sara Guzovski for their excellent testimony at the ED hearings. With the new Administration and the current leadership in the Legislature, it is possible to speak more frankly about the devastating cuts mental health and substance abuse programs have sustained over the last 20 years. As mentioned above, funding will still be tight, but we believe that there is opportunity for meaningful dialog with a wide variety of stakeholders about resource allocation and program development.

Please visit our new website at www.psychiatry-mps.org and give us your feedback.

As this is our last newsletter of 2007, on behalf of your MPS, I would like to wish all our members a happy and healthy holiday season and an excellent New Year.

Eugene J. Fierman, MD
President of MPS

APA and MPS Dues Update

If you have not yet received your 2008 dues invoice from the APA, it may be because you have not paid your 2007 dues. If this is the case or if you have questions regarding dues, please contact Patricia Anthony at panthony@psych.org or 703-907-7363. You may pay by credit card or check.

Managed Care Update

Tamper-Proof Prescription Pads:
In response to strong concerns from physicians, pharmacists, and others, Congress delayed the regulation mandating the use of tamper-proof prescriptions for Medicaid patients for six months. If President Bush signs the legislation as expected, the new deadline is March 1, 2008.

For more information, see the CMS FAQ http://www.cms.hhs.gov/DeficitReductionAct/Downloads/MIMPTRF A05922007.pdf or MMS web site http://www.massmed.org/

BCBSMA TOP Program Updates:
BCBSMA is making several changes in the TOP program and will be sending a letter to providers, so be on the lookout for it.

1. For the Phase II (August 1, 2007-March 31, 2008), providers will receive “credit” for patients who decline to complete the TOP by filling in the following areas in the “TOP 4.2 CR” registration/demographic form and faxing the form to BHL:
   - Sex
   - Date of Birth (Must be completed in entirety- mm/dd/yyyy)
   - The “For Office Use Only” section in its entirety:
     - BHL provider code (Clinician’s BHL Provider Number)
     - Client code field: write “REFUSED.”
     - Date treatment began or is to begin
     - Primary payor ID (Indicate “MABCBS”)
     - Primary payor card ID (BCBSMA member ID – no letters)

2. If patients decline to participate, then a Treatment Request Form (TRF) must be submitted to BCBSMA to request additional sessions.

3. BCBSMA will be carving-in the Magellan patients on January 1, 2008. This means that these patients will be added to a provider’s total number of patients and they will therefore need a TOP from January 1 to March 31, 2008.

BCBSMA Removes Initial Authorization Requirement
As of January 1st, 2008, BCBSMA will automatically authorize the first 12 outpatient sessions with participating providers in a calendar year. This change applies to all managed care members except those with Federal Employee Health Benefit Plan (FEP) or Medicare Advantage.

To receive authorization for additional visits beyond the initial twelve, providers can submit a TOP form or a Treatment Request Form.

Remember, that all are welcome to the monthly Managed Care Committee Meeting, which usually occurs on the last Thursday of the month at the MPS offices (check the website for exact dates or, as usual, please feel free to contact me at: gregorygharris@sprynet.com).

Gregory G. Harris, MD, MPH
Chair, MPS Managed Care Committee
As always, the fall is a very busy time for the MPS office! We have accomplished much over the past couple of months, which I hope will please our members.

I attended the APA Institute of Psychiatric Services in New Orleans in October and was pleased to see Drs. John Renner, Jeff Stovall, Sarah Guzofski, Donna Norris, Mark Hauser and Roy Perlis presenting at the Institute. All the programs that I attended were informative and thought provoking. This Institute was a testimony to the resiliency of the people of New Orleans. The devastation and their commitment to rebuild their community were inspiring. It was interesting to hear that prior to Katrina there were 169 psychiatrists in New Orleans. After Katrina, there were 20. The needs of this community remain great.

On October 15th we held our Second Annual Member Appreciation Night. We had about 60 people attending the dinner at Ken’s Steak House in Framingham. Dr. Fierman provided a brief update of what has been happening here at the MPS, and Kim Neuhauser, our Communications Manager, demonstrated our new website that went live that day. Otherwise the evening was strictly for socializing with colleagues. We look forward to doing this again next year.

In October we initiated a new membership recruitment effort. We sent out a letter to all non-MPS psychiatrists in the Commonwealth asking them to join the MPS. As an added incentive to get them to join, anyone who joins/rejoins from now until December 31, 2007 will receive a complimentary CME program for 2008. If you know of someone who is not a member, I hope that you will encourage them to join.

As a friendly reminder, I would like to remind those members who have not paid their 2007 dues that the APA policy now drops all members who have not paid their dues for that current year on December 31st. This is no longer the case. If you have any questions about your dues, please either call MPS (781-237-8100) or Patricia Anthony at the APA at panthony@psych.org or 703-907-7363.

To all of you that completed the MPS Surveys. “Thank you.” We are reviewing the information and in the January newsletter will be providing a detailed report for our membership. In the meantime, here are some interesting demographic facts about our membership:

- Almost 50% of those who responded have been a member for over 20 years; two-thirds of our membership is male; and one-third of our members are between 51 and 60 and another third is between 30 and 50; the remaining third is 61 or over.

To update your own information in the Member Profile section. Over time we want to use this section of the website to encourage members to talk with each other on topics of interest. There will also be pages for the various committees to communicate with all the membership about the activities of the committees. We are also planning to have copies of all of our previous newsletters on this section of the website as well.

The second matter with the website is that now you can register and pay online for any of our programs. By clicking on the “Events” button and going to the calendar and selecting the event from the calendar, you will see an icon that will allow you to register and pay online for the program. The system will send you an email letting us know that you have registered. On this same page, you will be able to connect to MapQuest to get directions to the venue for the program directly from whatever address you enter. We are sure that this will be helpful to our membership.

You should have received the brochure for the Annual Psychopharmacology program on November 17th. The program will be an all day program at the Massachusetts Medical Society in Waltham. We will teleconference the program to Holyoke. Because the afternoon session is a breakout session, and we will only be able to teleconference one session, we will determine which breakout session has the most interest and will teleconference that breakout session. We hope that you will join your colleagues in what should be a very informative program.

On September 29, 2007, the MPS jointly sponsored a program for PCPs and Family Physicians on screening for depression with the Massachusetts Medical Society. Dr. Robert Levin was the moderator for the meeting and Dr. Andrew Nierenberg was one of the presenters. It was a well received presentation and we will continue to develop joint programs with the MMS. While at this meeting, I also met Rebecca Lynch who is the Outreach Coordinator for Families for Depression Awareness. They have a number of materials available to clinicians and the general public (for free!). Right now they are promoting Teen and Parent Depression and Bipolar Wellness Guides. They also have an Adult Depression Wellness Guide, as well as pamphlets on stress, bipolar disorder and helping someone who is depressed. If you would like further information about them, please contact me directly.

As Dr. Fierman mentioned in his column we have had several members testify before State Legislative Committees this past month. If you would like to read the testimony, you can find them on our website.

Please note that the MPS offices will be closed on November 12th for Veteran’s Day and from noontime on November 21st to Monday November 24, 2007 for the Thanksgiving holiday. In December, our offices will be closed from noontime on December 21st until January 2, 2008. On behalf of the staff, I want to wish all of you a very happy holiday season!

As always, if you have questions or concerns, please do not hesitate to contact us. We are here for our members and look forward to being able to assist you in any way that we can.

Beverly Sheehan
Executive Director of MPS
Absolute Power: The Eist Case

[This article was submitted by Robert L. Pyles, MD, Immediate Past-president of MPS and Senior APA Representative for MPS.]

“And remember, where you have a concentration of power in a few hands, all too frequently men with the mentality of gangsters get control. History has proven that. All power corrupts; absolute power corrupts absolutely.” So wrote Lord Acton in his famous 1887 dictum.

One hundred and twenty years later, this sentiment reverberates throughout the opinion written by Judge Deborah S. Eyler of the Maryland Court of Special Appeals. The unanimous ruling in favor of Harold I. Eist, M.D. in Maryland State Board of Physicians v. Harold I. Eist, M.D. is the fifth decision in support of his stand for patient confidentiality and professional ethics. In over five years of litigation, an Administrative Law Judge (twice), two separate Maryland Circuit Judges, and now three appellate judges have held that the prosecution of Dr. Eist was unfounded.

The Original Complaint
The Board’s attempt to discipline Dr. Eist arose out of a bitterly contested divorce and custody battle in which he was the treating psychiatrist for three members of a family (the wife and two of the children). The father (an attorney) complained to the board that Dr. Eist was overmedicating these three patients, and had behaved rudely toward him. In keeping with their policy, the board automatically demanded the entire charts on all three patients, without considering the merit of the complaint or the motivation of the father. Indeed, it later developed that the board was prepared to comply with the father’s demand that the charts be turned over to him.

Acting in accordance with medical ethics, Dr. Eist contacted his patient to obtain permission, which was refused by the patients and their attorneys. Dr. Eist notified the board and was told, “For your information, receipt of those medical records is not contingent upon the consent of the patient/s.” Because he would not release the records until the patients allowed him to do so, Dr. Eist was charged with failure to cooperate with a lawful investigation.

The Issues in the Case
At the heart of this case is the Maryland board’s assertion that its power is absolute, not answerable to patients, physicians, legal precedents or medical ethics. The board saw no need to directly notify the patients that their charts were subpoenaed, nor did the board see fit to conduct a less invasive investigation, such as interviewing the patients or requesting the relevant sections of the chart (e.g. the record of medications prescribed). The board was ignored communications from the patients indicating that the charges were false, and that the treatment was satisfactory. It remained the board’s position that their issuance of a subpoena, and the obligation of compliance, was not open to challenge or legal review.

The Court’s Decision
The court’s decision closely followed the reasoning in the amicus brief submitted by twenty-eight organizations representing physicians, psychiatrists, patients and privacy protection groups, including the Massachusetts Psychiatric Society, the American Psychoanalytic Association, the American Psychiatric Association, and the American Association of Practicing Psychiatrists. In keeping with previous court rulings in this case, the opinion was sharply critical of the board’s conduct and legal reasoning, and laudatory toward Dr. Eist for his principled stand in protection of his patient and professional ethics.

Perhaps the most heartening message from the decision of this court was the respect and understanding on the part of the judges for the work we do with our patients. In language strongly reminiscent of the landmark Jaffee-Redmond Supreme Court decision, which reaffirmed the therapist-patient privilege, Judge Eyler stated, “In fact, the psychiatrist-patient relationship depends in large part upon the patient’s having the trust in the doctor and confidence in the privacy of the therapeutic relationship that will foster a willingness to disclose innermost thoughts. That relationship can be damaged merely by the threat that the records containing the patient’s most personal thoughts will be turned over to others to examine.”

Key Findings for the Practicing Psychiatrist
1. The power of the medical board is not absolute. Like other American governmental agencies, it is subject to checks and balances. While the board has the right to issue a subpoena for medical records, patients and physicians have the right to protest and challenge the subpoena.
2. The court clarified that the right of the state to obtain privileged information must always be balanced against the individual’s right to privacy. The state is required to evaluate a patient’s Constitutional privacy interests and also to apply the “Westinghouse factors” (a landmark court case which operationalized a balancing test), before it issues a subpoena.
3. The patient must be notified that a subpoena, or a request for records, has been issued by the board.
4. If the patient or physician challenge a request for medical records, the burden rests with the board to prove that its need to invade privacy outweighs the patient’s right to privacy. It is then incumbent upon the board to seek an independent court ruling in which the Westinghouse factors will again be applied in a legal setting. In the words of Judge Eyler, “...a balancing analysis that takes the Westinghouse factors into consideration is the proper standard for weighing ‘individual privacy interests in medical records against competing state interests in those records,” and that “[w]hether a compelling state interest can be shown in order to override an individual’s privacy interest is to be determined on a case-by-case basis.”

What's Next
The Maryland Court of Special Appeals found that the initial complaint against Dr. Eist was without merit; application of a balancing test would have failed to result in a subpoena for the patient records. Therefore, Dr. Eist had not failed to cooperate with a lawful investigation – the investigation itself was not “lawful.” The board has one more opportunity to request review from the highest court in Maryland. According to legal counsel, the carefully detailed 56-page opinion of the Court of Special Appeals can easily bear scrutiny from that court. Such an opinion would only further strengthen the privacy rights of Maryland’s citizens.

The implications of this case extend beyond the state of Maryland. Boards and professional associations have been carefully observing this case which further establishes a model for a just balance of power between medical boards and individual patients and physicians. Lawmakers in all 50 states and Congress will benefit from this reaffirmation of a patient’s right to privacy. This is of particular importance given the rush to embrace electronic medical records without adequate privacy protection.

The case may prove to be of particular importance to us in Massachusetts. Our own state board has recently made the unilateral...
As the year progressed, I wish I could say my mood improved on those post-call days. Along with my sleep deprivation, my relationship with related to medicine became cripplingly weak. At the dinner table, I lapsed into medical slang and discussions about pimping, both of which, I my husband changed as well. Besides my sense of humor, which I believe took a turn for the worse, my ability to talk about anything not a job that essentially guarantees holidays as vacation. They even promote a special shortened work day prior to major holidays. Previously, have been informed, are really boring (and frustrating) for those not familiar with it. My husband, of the non-corporate, non-profit world, has 

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decision to require that physicians obtain an NPI (National Provider Identifier) as a condition of relicensure. The NPI is not required fed-

That this is no accident is reflected in current legislation introduced by the Mass. Board to allow unfettered access to physician offices and to patient records, without patient consent, and without any complaint being filed. This is exactly the action that the Maryland Court of Special Appeals found to be unconstitutional, a violation of the Fourteenth Amendment, citing the right to liberty and due process of law.

Returning to Lord Acton’s dictum, this court has affirmed the importance of the principle of checks and balances, particularly between the interests of government versus the rights of individual citizens. Acton seems to have intuitively understood that unchecked power almost inevitably leads to narcissistic regression and abusive behavior. As James Madison cogently stated, the primary purpose of the Constitution is to protect citizens from their government. The Maryland Court of Special Appeals clearly agrees.

For the complete text of the decision, contact: Website.courts.md.us/opinions (Court of Special Appeals, 9/13/07)
Your APA, Our APA

Let’s talk facts. Education is part of the strategic efforts of the APA. There is a great deal of misunderstanding about mental illnesses. The APA has been trying to educate the public through an initiative to develop multiple brochures entitled “Let’s talk facts,” covering an array of topics related to various illnesses and mental health concerns. The brochures are easily available for downloading through the APA website. They make nice leaflets for an office practice. This is only a small part of the information offered to the public by the APA. There is an entire section of the APA website labeled “Healthy Minds. Healthy Lives” (available at www.healthyminds.org) devoted to public awareness of issues important to our patients and each other. This website has been the brainchild of the APA public affairs staff in their effort to decrease the stigma of mental illness by increasing information sharing.

To highlight a recent campaign seen on the website, one can look at the brief description related to suicide prevention. In honor of National Suicide Prevention Week, which was observed September 9-15, 2007, the American Psychiatric Foundation, in conjunction with the APA, produced a 30-second public service announcement entitled “Father/Son.” If you have not seen it, go to the Healthy Minds website and watch it—it is a good example of a brief but powerful clip to heighten awareness of the need to seek treatment to help decrease the chance of losing someone to suicide.

Educating the public is an active part of the APA effort. But there is also a component of the organization that aims to educate psychiatrists, and there are many opportunities for free CMEs along the way. For example, the Grand Round series offers an interesting case presentation, followed by a forum for email exchange among participants as the case is vetted and management topics are raised. The email exchange is archived, and for a period of time it is available for CME credits through the members’ corner. Though older archived topics are also available, topics that are currently on the website for free CMEs include: “Psychiatric Issues at the End of Life: Depression, Suicidality, and Patient Autonomy,” “Medicare Part D and Your Psychiatric Practice,” and “Seclusion and Restraint,” to name a few. I would encourage you to peruse the options. They make for interesting reading and the CME credits can be obtained in the comfort of your home.

As this article is being written, many people are likely returning from the Institute on Psychiatric Services Meeting, held in New Orleans from October 11 to 14, 2007. This meeting was slated to be another incredible opportunity for APA members. Taking place in the heart of the city recovering from Katrina, several offerings were devoted to understanding disaster psychiatry, the mental health-related sequelae of the hurricane, and issues around homelessness. The APA is also gearing up for the November Assembly meetings. Held annually in Washington, D.C., this meeting will provide an opportunity to debate the latest action papers, including the ones mentioned in previous versions of this MPS newsletter article. Stay tuned for more updates regarding these recent meetings. And tune into the APA website once in a while to see what offerings there are for further education—for the public and for our profession.

As always, bring your suggestions for the APA forward to any of your APA Assembly Representatives. Our goal is to work for so that our APA is also your APA.

Debra A. Pinals, MD
MPS Representative to the Assembly of the APA

Additional MPS Representatives to the APA are Robert L. Pyles, MD and Frederick J. Stoddard, MD.

Recognition for MPS Colleagues

The Awards Committee has the most pleasant tasks of all MPS committees: We select five MPS members annually to receive awards at the Annual Meeting in recognition of their achievements and contributions to clinical psychiatry, public sector psychiatry, psychiatric education or psychiatric research, or the advancement of the profession—and one member for a “lifetime achievement” award. We know what pleasure these awards give to the awardees, their families, and their friends!

The committee selects from a pool of possible candidates, aiming for some geographical, gender and minority balance. We try to award those who are broadly known for their work but have not received MPS recognition, and also to find “unsung heroes”—those who may have accomplished something unusual or at significant personal cost in some more local or smaller area.

The committee really needs and appreciates help with finding worthy nominees. If you have a suggestion, please, please let us know—and do it soon! In addition to giving us the name and your reason for the nomination, we would also appreciate brief details of the candidate’s interests and achievements, as well as general biographical information.

You can contact either of us with questions, or send your nomination to the MPS Awards Committee by January 31, 2008 at MPS, 40 Washington Street, Suite 201, Wellesley, MA 02481 or to: mpatel@psychiatry-mps.org.

Kathleen M. Mogul, MD
Marie Hobart, MD
Co-Chairs, MPS Awards Committee

APA Minority Fellowships Awarded

The APA Minority Fellowship Selection Committee recently announced its new and continuing Fellows. Congratulations to the following MPS members who were awarded Fellowships!

Suzan Song, a third-year psychiatry resident at Harvard Longwood, is interested in cultural, and child and adolescent psychiatry. She will serve on the Committee on Family Violence and Sexual Abuse.

Tyrone Williams, a fourth-year psychiatry resident at the Cambridge Hospital, is interested in ecclesiastical psycho education and child and adolescent psychiatry. He will serve on the Committee on Public Affairs.

Shunda McGahee, a fourth-year psychiatry resident at Massachusetts General/McLean Hospital, is on the Committee on Ethnic Minority Elderly.

Eduardo Zaidner, a third-year psychiatry resident at Cambridge Hospital, is on the Committee on Gay, Lesbian and Bisexual Issues.

Anne Ruminjo, a second-year psychiatry resident at Beth Israel Medical Center, is interested in public, and consultation/liaison psychiatry. She will serve on the Council on Global Psychiatry.
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**CLASSIFIED LISTINGS—November/December 2007**

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**OPPORTUNITY TO BE AN ENTREPRENEUR!** Two airy consulting rooms new to market in Beacon Street Brookline professional building near Coolidge Corner. Convenient public transportation. Rent negotiable. All offices available to sublet to colleagues and have your own office at bargain rate. 617-734-8358 evenings berg@massmed.org

**BOSTON** - Conveniently located near Financial District and Downtown Crossing, newly furnished 2 office suite with a waiting area for psychiatrists and psychotherapists, T and handicapped accessible, 24 hrs security. Call Derek at 617-350-5100.

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**PSYCHIATRISTS**

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**Dimock Community Health Center:** one of Boston’s largest comprehensive health centers, has a part time psychiatrist position available for licensed, board certified psychiatrist with an interest in substance abuse. Opportunity for a leadership position over collaborative mental health programs. Contact: Dr. Myechia Minter-Jordan Chief Medical Officer mminterj@dimock.org

**PART-TIME PSYCHIATRIC CONSULTANT** Comprehensive Outpatient Services Inc, is seeking for immediate hire a PT Psychiatrist to join our growing licensed outpatient mental health clinics in Fitchburg and Lowell. Duties include: Psychiatric Assessments, Psychopharmacological visits, Consultation to staff. Please contact: Bruce Mermelstein, Ed.D., 188 Needham Street, Newton, MA 02464, 617-527-4610 Fax 617-527-6829 email: bmermel@aol.com

**Hospital Practice Psychiatry, PC** seeks staff psychiatrists for two JCAHO-accredited MA Dept. of Mental Health facilities: Cape Cod and Islands Community Mental Health Center offering a 16-bed inpatient unit, day treatment, and crisis services; and Taunton State Hospital a 187-bed facility offering comprehensive inpatient care. Positions are available in general adult, geriatric and forensic psychiatry. No weekend or night call. AA/EOE, J-1 Waiver Available. Competitive Salary and Benefits. Contact Marcia Fowler @ 617-877-0313 or send CV to marcia.fowler@dmh.state.ma.us Polaris Healthcare Services, Inc. 60 Hodges Ave Ext. Taunton, MA 02780 ( 508) 977-3738

**PACT Psychiatrist Cape Cod** - Practice cutting edge community mental health in a seaside environment. Vinfen Corp is starting a Program for Assertive Community Treatment in Hyannis. This 20-hour/week position on an integrated team will provide psychiatric care for 60 individuals with SPMI. Vinfen has two other PACT teams which provide opportunities for peer learning and support. Competitive compensation and benefits. For further information or to send letter of interest and CV, contact Ken Duckworth, MD, Medical Director, Vinfen, 617/441-1750; email duckworthk@vinfen.org; fax 617/577-7127.

**The Physicians of Tufts-New England Medical Center** seek a full-time or half-time adult psychiatrist to add to its first rate psychiatry staff. The psychiatrist would join a 4.5 person group practice caring for 60 patients on the Department of Mental Health inpatient units at the Lindemann Mental Health Center in Boston, a Joint Commission certified public sector facility. We provide continuing inpatient care to DMH-eligible patients transferred from acute psychiatric units, and also evaluate and treat criminal defendants for the courts. No weekend or night call, no managed care. Please direct inquiries about available psychiatry positions to Marco Caicedo, MD, Chief of Psychiatry, phone: (617) 626-8557; email: Marco.L.Caicedo@state.ma.us

**CAMBRIDGE HEALTH ALLIANCE**

Part-time psychiatrist, approximately 10 hours/week (two half days/week), for multidisciplinary Psychiatric Emergency Service at Cambridge Hospital. Candidates should have experience with emergency psychiatry, comfort with screening of general medical issues, and strong skills with substance abuse populations. Interest in teaching is desired. Child and adolescent expertise, added qualifications in addictions, knowledge of forensic issues, and/or fluency in Spanish or Portuguese a plus. Responsibilities include direct clinical care as well as supervision of trainees and other mental health providers. Schedule flexible—salaried position. Harvard Medical School appointment for qualified candidates as determined by the criteria of Harvard Medical School. Cambridge Health Alliance is an Equal Employment Opportunity employer, and women and minority candidates are strongly encouraged to apply. Email CV to Dr. Derri Shtasel, Chief of Adult Psychiatry at dshtasel@challiance.org or Fax to 617-665-2521.

**OUTPATIENT PSYCHOPHARMACOLOGIST – SOUTHEASTERN PSYCHIATRIC ASSOCIATES, a busy private practice located in Randolph, and at Carney Hospital, is looking for a psychopharmacologist to build their practice with us. We have a friendly, professional, stable group of first class providers and are looking to expand on this. This position would initially be 15-20 hours with the opportunity for expanding to full-time. Compensation is excellent. Contact Leonard Marcus, MD at (617) 696-7727, fax (781) 963-7776, or e-mail to leonardmarcus@comcast.net.

**WORCESTER** - Director of Child Psychiatry Inpatient Consultation-Liaison and Emergency Mental Health Service. Faculty appointment and leadership role in the UMass Medical School Division of Child and Adolescent Psychiatry and the UMass Memorial Children’s Medical Center. Considerable supported teaching activity and research opportunity. Must be BE/BC in Child Psychiatry. Please send CV and letter of interest to: W. Peter Metz, M.D., Director, Child & Adolescent Psychiatry, UMass Medical School and UMass Memorial Children’s Medical Center, 55 Lake Avenue North, Worcester, MA 01655 or e-mail peter.metz@umassmed.edu AA/EOE
Established respected behavioral health-care leader in the Southeastern Massachusetts Region is looking for a board certified/eligible child psychiatrist to work part time in a private mental health clinic serving the Greater Fall River Area. This represents excellent opportunity to provide clinical leadership, supervision, & psychiatric services to an area in need. Interest parties should send their C. V. to Philip Allard, COO, 101 Rock Street, Fall River, MA 02720. pallard@frfsa.org.

FELLOWSHIP POSITIONS AVAILABLE FOR JULY 2008

Faulkner Hospital, an affiliate of Brigham and Women’s Hospital and a member Of Partners Health Care System, will have two half-time fellowship positions available in its Adams House Psychotherapy Training Program beginning 7/1/08. The Adams House Fellowship provides advanced training in psychodynamic psychotherapy for psychiatrists who have completed residency training and who wish to develop their psychotherapy skills further. Fellows treat patients for whom long term psychodynamic psychotherapy is indicated, with close, experienced supervision for each case. Seminars focus on psychodynamic theory and treatment technique. Generous stipend and benefits. Superb supervision. To apply send a letter of interest and CV to K.C. Potts, M.D., Associate Chief of Psychiatry, Faulkner Hospital, 1153 Centre St., Boston, MA 02130, or fax to 617-983-7455 or email to kcpotts@partners.org, Equal Opportunity Employer

CENTRAL MASSACHUSETTS
Child and Adolescent Psychiatrist/Medical Director Faculty Positions

The University of Massachusetts Medical School (UMMS), Department of Psychiatry, is seeking child psychiatrists to serve as Medical Directors at the UMass Intensive Residential Treatment Programs located at Westborough State Hospital and Worcester State Hospital, each serving adolescents ages 13-19 years. Length of stay of several months or more supports a milieu treatment program/team approach. Positions may be full or part-time (28 hours/week). Candidates must be BC/BE in Child and Adolescent Psychiatry. Experience in teaching and training residents and medical students is desirable. Faculty appointment, teaching, and research opportunities available. Competitive salary and excellent benefits. Join a vital and growing academic division of Child Psychiatry. Send letter of interest and C.V. to: W. Peter Metz, M.D., Director, Child & Adolescent Psychiatry, UMass Medical School, 55 Lake Avenue North, Worcester, MA 01655 or e-mail peter.metz@umassmed.edu AA/EOE
PROGRESSIVE THERAPEUTICS LLC

Is looking for a

BC/BE Child and Adolescent Psychiatrist

Psychopharmacology private practice located in the Natick/Framingham line on easy access Route 9 seeking qualified BC/BE Child and Adolescent Psychiatrist. Our young, small, progressive and dynamic group uses cutting edge technology to facilitate excellent patient care and professional growth and is in search of energetic motivated individuals for our growing practice.

- State of the art Computerized Office, Electronic Medical Records, Electronic Scheduling and Billing.
- Easy access from Boston and Western suburbs
- Attractive office space and building
- Flexible hours: part time to full time
- No calls – cross coverage for vacations only
- Competitive overhead
- Administrative support
- Supervision available

Call Patricia Frischtak M.D. at 508-834-3183 or email pfrischtak@progressivetx.com For more information about our practice please visit our website www.progressivetx.com

ACGME-Accredited Psychosomatic Medicine Fellowship, 2008-2009

The Cambridge Health Alliance, Cambridge, MA

Cambridge Health Alliance is an urban community health network affiliated with Harvard Medical School. The hospital has residencies in adult Psychiatry, Primary Care Medicine and fellowships in Child and Geriatric Psychiatry. The Psychosomatic Medicine Fellowship is a 1-year program for 2 PGY-V psychiatrists providing training in the delivery of consultation services to a culturally diverse array of primary care clinics as well as traditional psychiatric consultation in community general hospitals. Cambridge Health Alliance’s unique blend of community and academic resources offers exceptional opportunities for professional growth. Responsibilities: direct patient care, supervision of psychiatry and primary care residents and medical students, development of an academic project. Contact Robert Joseph, M.D., Director, Consultation-Liaison Psychiatry, 617-665-1544, email robert_joseph@hms.harvard.edu, fax 617-665-2506 or Nadine Grant 617-665-1383 for more information.
**Classified Listings—November/December 2007**

**Psychiatrists**

No call! No nights or weekends!

MedOptions, a leading provider of psychiatric services to residents of long-term care and assisted living facilities in Southern New England, has full and part-time positions available throughout central and eastern Massachusetts.

We are seeking psychiatrists who enjoy collaborating with nurse practitioners and physician assistants. We offer flexible hours at facilities that are convenient to where you live or practice.

For more information, please contact:
Marianne Wright
800.370.3651, ext 164
mwright@medoptionsinc.com
Visit our website at www.medoptionsinc.com

**MHM Services, Inc**

**Massachusetts:** MHM Services, Inc. is proud to announce our affiliation with the Massachusetts Department of Correction. Positions currently exist at MCI Shirley (PT 28hrs/wk) and NCCI/Gardner (PT 28hrs/wk). Hours may be combined to form a full-time position or may be divided to form a variety of part-time options. We are seeking Psychiatrists who are ready to make a difference to an underserved population while being part of an elite organization that offers outstanding benefits and generous compensation. Gain personal and professional satisfaction, while utilizing your skills in a safe and supportive work environment. Guide the delivery of mental health services to this diverse population of incarcerated individuals. Contact Holley Schwieterman at (866) 204-3920 or email: hschwieterman@mhm-services.com to learn more. www.mhm-services.com

**Adult, Child, Subspecialty Psychiatry- Boston, MA**

Harvard Vanguard Medical Associates ([http://www.harvardvanguard.org](http://www.harvardvanguard.org)), an eminent and growing multispecialty, ambulatory group practice, is expanding its Behavioral Health Departments at several of our Boston and surrounding area offices. We are one of the most active and successful outpatient psychiatric practices in New England, with a long tradition of innovation and collaboration with our medical colleagues. Our psychiatrists work closely with their medical colleagues (internists, pediatricians and gynecologists) in addition to their multidisciplinary teams of behavioral health clinicians (psychologists, social workers and clinical nurse specialists) in a collaborative approach to mental health care.

Responsibilities include outpatient psychiatric evaluation, treatment planning and treatment, medication management services, participation in a multidisciplinary team, and supervision of clinical nurse specialists and trainees in our behavioral health fellowship program. Opportunities range from half-time to full-time. Our practice features a state-of-the-art electronic medical record, e-prescribing, and excellent practice supports (billing and authorization matters are all taken care of for you). We are an affiliate of Harvard Medical School where teaching opportunities and an academic appointment are available for the right candidates through the Department of Psychiatry. We offer a very competitive compensation and benefits package.

Please forward your CV to: Brenda Reed, Physician Recruitment, Harvard Vanguard Medical Associates, 275 Grove Street, Suite 3-300, Newton, MA, 02466-2275. Fax: 617-559-8255; e-mail: brenda_reed@vmed.org, or call: 800-222-4606; or 617-559-8275 within Massachusetts. EOE/AA. Sorry, not a J-1 visa opportunity.

**Anna Jaques Hospital has Immediate Need for 2 Psychiatrist Positions:**

**Medical Director, Inpatient Adult Psychiatry Unit**

Opportunity for board certified (or qualified) Psychiatrist for full time Medical Director Position on a 20-bed inpatient unit. 75% clinical/ 25% administrative. Competitive salary and benefits. To learn more about Anna Jaques Hospital log onto www.ajh.org.

**Staff Psychiatrist**

Immediate need for a Board certified (or qualified) Psychiatrist. Position is half time in a 20-bed inpatient setting.

There is an additional opportunity for up to half time in an established, busy outpatient clinic setting if desired. Competitive salary and benefits.

To learn more about Anna Jaques Hospital log onto www.ajh.org

Send CVs to: Thora Healy, Medical Staff Office, Anna Jaques Hospital, 25 Highland Ave, Newburyport, MA 01950 fax: 978-463-1215 email: thealy@ajh.org
## Calendar of Events

<table>
<thead>
<tr>
<th>Committee</th>
<th>Date</th>
<th>Time</th>
<th>Location</th>
<th>Contact Email</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethics Committee</td>
<td>November 7 at 7:15 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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</tr>
<tr>
<td>Council</td>
<td>November 13 at 6:45 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<tr>
<td>Committee for Women</td>
<td>November 16 at noon</td>
<td>MPS</td>
<td><a href="mailto:mpatel@psychiatry-mps.org">mpatel@psychiatry-mps.org</a>    781-237-8100 X 211</td>
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<tr>
<td>Psychopharmacology Program</td>
<td>November 17 at Mass Medical</td>
<td><a href="mailto:mpatel@psychiatry-mps.org">mpatel@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<tr>
<td>Executive Committee</td>
<td>November 27 at 6:45 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<tr>
<td>Ethics Committee</td>
<td>December 5 at 7:15 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<tr>
<td>Ethics Committee</td>
<td>January 2 at 7:15 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<tr>
<td>Council</td>
<td>January 8 at 6:45 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<td>Executive Committee</td>
<td>January 22 at 6:45 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<td>Managed Care Committee</td>
<td>January 24 at 6:45 pm</td>
<td>MPS</td>
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<tr>
<td>Geriatrics Interest Group</td>
<td>January 30 at 8:00 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
<td></td>
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<tr>
<td>Ethics Committee</td>
<td>February 6 at 7:15 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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<tr>
<td>Council</td>
<td>February 12 at 6:45 pm</td>
<td>MPS</td>
<td><a href="mailto:bsheehan@psychiatry-mps.org">bsheehan@psychiatry-mps.org</a> 781-237-8100 X 211</td>
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**Northeast Psychiatric Group, PC** seeks a full-time or half-time adult psychiatrist to add to its first rate psychiatry staff. The psychiatrist would join a 9 person group practice caring for 112 patients on the Department of Mental Health inpatient units of Tewksbury Hospital, a Joint Commission certified public sector facility. We provide continuing inpatient care to DMH-eligible patients transferred from acute psychiatric units, and also evaluate and treat criminal defendants for the courts. No weekend or night call, no managed care. Contact Daniel Breslin, MD at 617-727-4610 X2863 Daniel.Breslin@dmh.state.ma.us

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**November 17, 2007**

**18th Annual MPS Psychopharmacology Program at the Mass Medical Society**

To register, go to: www.psychiatry-mps.org/calendar.cfm or contact Mayuri Patel at: 781-237-8100, ext. 210 or at mpatel@psychiatry-mps.org