**HIGHLIGHTS**

**BOARD OF TRUSTEES MEETING**

**December 14-15, 2019**

*The information below constitutes an unofficial record of minutes and actions of the meeting are subject to change. Official minutes are not official until approved by the BOT at its next meeting.*

**CEO Update**

Dr. Saul Levin thanked Dr. Bruce Schwartz, Board of Trustees, and APA Administration for their hard work in 2019. He also announced Ardell Lockerman’s retirement from APA after 43 years of service and introduced Dr. Nitin Gogtay as APA’s new Research Director and Deputy Medical Director. Dr. Gogtay comes from NIMH and will be starting on March 2, 2020. Dr. Levin wished everyone a happy holiday season.

**Final Rule - 2020 Medicare Physician Fee Schedule**

Due to APA advocacy with CMS, they have agreed to increase payments in 2021 for outpatient evaluation and management (E/M) services. It is estimated that the payments attributed to psychiatry will increase by approximately 7 percent. Medicare reimbursement is a zero-sum game. This change means that some physician groups will see an increase in payments while others will have a corresponding decrease in payments. We will be following this closely as CMS responds to efforts by physician and non-physician groups who are pushing back against a cut in payments. In addition, documentation changes are also on the horizon and APA Administration will be providing educational information to help members prepare for 2021.

**APA App Advisor and Expert Panel**

There is a new initiative coming from our Committee on Health Information Technology. APA first debuted our “APA app evaluation model” in 2017. The model provides guidance to those who want to evaluate apps on their own, focusing on five levels:

1. Collecting background information on the company that has developed an app,
2. Looking at its privacy and security features;
3. Looking at the empirical—and other types of evidence—base;
4. Looking at how easy it is to use for the patient (research shows that even if an app is effective, it’s only useful if the patient sticks with it, similar to medication adherence); and then
5. Looking at “data integration,” or, how usable the data is.

This year, APA expanded this project and created an APA app advisor expert panel that is comprised of psychiatrists, PhD clinical psychologists, masters of social work, informaticists, and also patients with lived experience. The panel began their work in November and will evaluate three apps per month using APA’s model. Once evaluated, they will be highlighted on APA’s website.

**Annual Meeting-San Francisco**

The Board of Trustees voted to approve San Francisco as the location for the Annual Meeting in 2032 and 2035. By reserving the dates before the end of 2019, APA is able to lock in 2019 pricing for the use of the facility. The convention center typically increases rates 4-5 percent annually so this will save several thousand dollars in future meeting costs. The contract will have provisions under which APA can cancel in the coming years if it decides not to go forward in San Francisco. The updated list of locations for future annual meetings include: Philadelphia (2020), Los Angeles (2021), New York (2022), San Francisco (2023), New York (2024), Toronto (2025), San Francisco (2026), New York (2027), Chicago (2028), San Francisco (2029), (2032) and (2035).

**Treasurer’s Report**

The Board passed the FY2020 operating budget with the understanding that APA could use their reserves to weather deficit spending in the short-term, but that over the next few years the APA must move toward a balanced budget. The Board resolved that the budget for fiscal year 2023 must be balanced and asked the strategic finance workgroup to report back in March 2020 with recommendations on expense reductions, revenue enhancements, and potential new revenue sources to close the budget gap.

##### 2020 APA Election - Slate of Candidates

The 2019-20 Nominating Committee, chaired by Altha Stewart, MD, reported the following final slate of candidates for the 2020 Election. For more election information, please visit the [Election](http://psychiatry.org/psychiatrists/awards-leadership-opportunities/leadership-opportunities/elections) section under the Board of Trustees on the APA website or email election@psych.org.

**PRESIDENT-ELECT**

David C. Henderson, MD

Henry A. Nasrallah, MD

Vivian B. Pender, MD

**TREASURER**

Ann Marie T. Sullivan, MD

Richard F. Summers, MD

**TRUSTEE-AT-LARGE**

Frank Clark, MD

Mark Komrad, MD

Michele Reid, MD

**AREA 2 TRUSTEE**

James P. Kelleher, MD, MBA

Glenn A. Martin, MD

**AREA 5 TRUSTEE**

Jenny Boyer, MD, PhD, JD

Philip L. Scurria, MD

**RESIDENT-FELLOW MEMBER TRUSTEE-ELECT (RFMTE)**

Mariam Aboukar, DO

Aatif Mansoor, MD

Sanya Virani, MD, MPH

##### IPS Vision Work Group

Dr. Jackie Feldman, as the chair of the workgroup, presented a summary from the APA’s IPS Vision Work Group. Dr. Feldman presented two concepts for the BOT to consider based on data gathered from focus groups at the 2019 Annual Meeting and the 2019 IPS, evaluations from those meetings, and data from a survey completed by past meeting attendees.

**Model A**, using the working title **APA’s Clinical Leadership Conference**, is designed to support the psychiatrists’ leadership skills to prepare them for leadership positions in a changing healthcare environment. Model A is a two and a half- day meeting with a number of plenary sessions and breakouts that support psychiatrists who are in new leadership positions and who are looking for a network of psychiatrists facing similar challenges. This meeting is proposed to be hosted in Washington, DC and potentially to align with APA Advocacy Day.

**Model B,** using the working title, **The Mental Health Services Conference**, focuses on the co-development of a multidisciplinary conference with a partner organization. Building on the success of the 2019 PEPPNET pre-conference in New York City, this meeting would be a gathering point for all clinicians working in community settings. It is proposed that this two-day conference would be held at a university or conference center in a major metropolitan area where there is a high density of interprofessional clinicians. Model B would also seek to identify a meaningful partner organization who would share in the costs, profits, and planning of this interprofessional meeting.

Both meetings would have a program that is primarily driven by plenary sessions with a small number of breakout sessions.

The proposals will be considered by the Board of Trustees at the March 2020 Meeting.

##### DSM Steering Committee Update

Dr. Paul Appelbaum, Chair of the DSM Steering Committee, reminded the Board of the changes they had approved in October 2019 to ARFID, and presented proposed changes to the DSM-5 for Reinstatement of Unspecified Mood Disorder; Narcolepsy Subtypes; and Substance/Medication-Induced Disorders, that the Assembly passed in November. The BOT approved changes proposed by the DSM Steering Committee.

##### Ad Hoc Work Group on Continuing Care Guidelines

##### Dr. Jerry Halverson, Co-Chair of the Work Group, reported on behalf of Dr. Gray Norquist. The Work Group is charged with developing standards for continued care of patients in the inpatient setting. This group reviewed the current criteria publicly available from payers on medical necessity, discharge, and admissions criteria, and many of these criteria focused on risk of violence. The group agreed that in developing principles for continued care they will not just focus on if a person is suicidal or homicidal and instead provide a standard of care that is more multifunctional such as something that includes level of functioning, engagement, and recovery environment. The group will not endorse any specific instrument, but rather support key principles with a multifunctional criteria. They will recommend there be strong education and training to ensure that any tool is used consistently and reliably as intended. The Work Group will provide a final report at the March BOT meeting.

##### Presidential Task Force on Interprofessional Collaboration

Dr. Sandra DeJong chairs the Presidential Task Force, which is charged with engaging stakeholders from mental health organizations to produce joint principles of effective collaboration to promote access to high-quality treatment for persons with serious mental illness. Representatives from APA’s Council on Healthcare Systems Financing, Council on Quality Care and Council on Advocacy and Government Relations as well as the Assembly are represented. Dr. Schwartz invited the following organizations to participate in the initiative: American Academy of Physician Assistants (AAPA), American Mental Health Counselors Association (AMHCA), Association for Behavioral and Cognitive Therapies (ABCT), American Psychological Association (APA), College of Psychiatric and Neurologic Pharmacists (CPNC), International Association of Peer Supporters (INAPS), National Alliance on Mental Illness (NAMI), National Association of Social Workers (NASW), Nurse Practitioners (AANP), and Psychiatric Nurse Practitioners (APNA). These organizations were selected due to their membership’s involvement in the clinical team for patients with SMI. During the first meeting, all of the organizations were grateful for being asked to participate and had many ideas for how all our organizations can collaborate. Another meeting will be held in January and report to the Board in March.

##### American Psychiatric Foundation Update

The APA Foundation updated the Board on the fellowship process. The process opened November 1, 2019 and closes at midnight on January 31, 2020. The Foundation also provided updates on the Center for Workplace Mental Health and Typical or Troubled - Notice, Talk, Act. Board members were also invited to Adopt-a-Book as a Holiday Gift at <https://apafdn.org/adoptabook>. The Foundation shared information on Advancing Minority Mental Health Awards as a great way to give back to community-based organizations that are doing impactful work in underserved minority communities. The awards application cycle is currently open and will close February 1, 2020. More information about the Foundation can be found at [www.apafdn.org](http://www.apafdn.org).

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##### Federal and State Legislative Update

On December 12, APA participated in a bipartisan Capitol Hill roundtable discussion held by House Veterans Affairs (VA) Health Subcommittee Chair Julia Brownely (D-CA), Representative Chris Pappas (D-NH), and the Health Subcommittee’s ranking Republican, Representative Neal Dunn (R-FL). Dr. Harold Kudler, an APA member who is an adjunct associate professor in the Department of Psychiatry and Behavioral Sciences at Duke University and a recent retiree from the VA, represented psychiatry on the panel. The panel focused on early impressions of successes and challenges in implementing the VA Mission Act, which passed in 2018 and took legal effect in June 2019. APA was one of four medical societies to participate on the panel, and the congressional sponsors expressed clear interest in continuing to work with APA as a resource in improving health care for our veterans.

APA also responded to a request for information issued in late November by a House Ways and Means Committee task force seeking ideas for improving health care in rural and underserved communities. APA submitted a response to the request for information including suggestions to invest in the mental health workforce; improve mental health coverage by passing mental health parity legislation; align 42 CFR Part II with HIPAA; improve access to telemedicine and telepsychiatry; better integrate physical and mental health through implementation of collaborative care; help patients access care by addressing social determinants of health; and address bed shortages, including inpatient psychiatric facility closures as a result of overaggressive ligature citations.

Based on information shared by our members, APA has launched an advocacy effort related to the risk of cuts to the Uniformed Services University and to military GME slots. The risk comes from an ongoing “Defense-wide Review,” which is focused on finding savings from civilian management agencies that operate Defense Department programs that are not directly run by the services. USU plays an enormously important role in training psychiatrists and other physicians across medicine. APA is educating key members of Congress about the importance of USU and DoD residency slots and engaging our partners in the physician community on the issue. After outreach from APA, the chair and ranking member of the House Armed Services Subcommittee on Military Personnel both expressed concern about potential cuts during a hearing on December 5.

**Schizophrenia Practice Guideline**

The Board of Trustees approved the Schizophrenia Practice Guideline. A patient’s guide and education slides for training programs will be developed in 2020 as derivatives of this guideline.

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