

RIPSNNEWS

RHODE ISLAND PSYCHIATRIC SOCIETY • A District Branch of the American Psychiatric Association

2005 Slate of Officers Installed at RIPS Annual Meeting



New president Paul Lieberman, MD, (left) presented a plaque to outgoing President, Lou Marino, MD, (right) acknowledging his professionalism, dedication, and leadership on behalf of the Society during his term in office. Dr. Lieberman is looking forward to his next two years as president, working on issues such as insurance, committee memberships, public relations, and professional satisfaction.

The following members were elected to office at the Annual Meeting on May 2, 2005.

President: Paul Lieberman, MD

President-Elect: Jay Thornton, MD

Secretary-Treasurer: Dawn Picotte, MD

Councilors: Achina Stein, DO and Jody Underwood, MD

Lt. Governor Fogarty Receives Slater Award

Lt. Governor Charles J. Fogarty was presented with the Eleanor Slater Award on Monday, May 2, 2005 at the Mediterraneo Restaurant. The Eleanor Slater Award, established in 2001, recognizes a public figure that has made a significant and sustained contribution toward the provision of services for persons with mental illness, and who has fought stigma by speaking out and supporting psychiatric care and treatment. The Award also seeks to encourage advocacy for persons with mental illness. It is established in honor of Eleanor Slater, a long-time friend to persons with psychiatric disorders.

In presenting the award, Dr. Louis Marino, President, said, "We are very fortunate to have an active advocate working so effectively for our patients. Lt. Governor Fogarty's efforts have directly and indirectly benefited all Rhode Islanders. Through his work increasing awareness of important behavioral health issues and through his work advancing mental health parity, many citizens suffering

from common yet debilitating illnesses are now able to return to a fulfilling and productive life."

A leader in mental health issues in the state, Fogarty authored legislation that made significant revisions to strengthen the Mental Health Parity law, amended the state pharmaceutical program to include medicines for depression, and expanded the program (*continued on page 3*)

July 2005

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RIPS COUNCIL

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PRESIDENT-ELECT

Jay Thornton, MD

SECRETARY-TREASURER

Dawn Picotte, MD

PAST-PRESIDENT

Louis J. Marino, MD

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International Affairs

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Editorial

Jay Thornton, MD

Editor

Lights, camera—ACTION PAPER!

As the name suggests, action papers are how the APA translates the ideas, thoughts, and beliefs of its membership into official association activities. The subject matter is wide ranging and includes issues that impact psychiatric practice, lobbying at the Federal and State level, and governance of the APA itself. Action papers are generally tied to an APA Strategic Goal such as:

- Advocating for our patients
- Advocating for the profession
- Defining and supporting professional values
- Supporting scientific standards, and high quality care.

Any member can come up with an idea, but a member of the Assembly must put an Action Paper forward. This is generally best done by submitting the paper to your district branch for consideration. Our two Assembly members are Patricia Recupero, MD and Andrea Mernan, MD. Our area of district branches, Area I which includes New England and eastern Canada, is among the more prolific in generation of Action Papers.

Action Papers have a specific format as follows:

- Subject
- Intent
- Alternatives
- Recommendation
- Implementation
- Estimated Cost
- Who submitted the Action Paper
- Endorsements
- Key Words
- APA Strategic Goal

Some subjects of the Action Papers submitted from Area I include:

- Informing the general public of the difference between a Psychiatrist and a Psychologist
- Supporting appropriate third-party reimbursement for off-label prescription uses and dosages

**The Rhode Island Psychiatric Society Newsletter, RIPSNEWS,
is a winner of the
2005 APA Newsletter of the Year Award.**

- Public education about medical treatments for psychiatric disorders
- Unused pharmaceutical return program-providing a means for patients to dispose of unused prescription medication
- Pharmacy benefit management-support clinically appropriate, and financially responsible prescribing independent of government or pharmaceutical influences
- Facilitate understanding and development of appropriate means for advancing medical knowledge via the electronic record
- Removing pharmaceutical logos from the Annual Meeting book bag
- Independent appeals mechanism for disputed managed care denials in all US states and territories
- Educate our patients and our profession regarding privacy and confidentiality

What happens to an Action Paper once submitted? The Assembly Rules Committee refers it to the appropriate Reference Committee where the author(s) present the paper. The Reference Committee discusses the content, may make changes, and either supports or does not support the paper. If supported it is referred to the floor of the Assembly for a vote. If not supported, the author has the right to take the paper directly to the floor of the Assembly for presentation. Once approved by the Assembly, the paper is referred to a Joint Reference Committee composed of the President-elect, Speaker-elect, two Assembly members (usually recorder and past Speaker) and two Board members. After this, depending on the subject matter, it is sent to the Board. And believe it or not, this is a simplified outline.

As is obvious, a lot can happen between the generation of an idea, the formulation and submission of an Action Paper, and the final approval and implementation. This should not deter you, however, from running your ideas by your District Branch, RIPS. Make yourselves heard, and help our Society and Association improve for the benefit of our patients and our profession. ACTION! ❖



Lt. Governor Fogarty accepting the Eleanor Slater Award from President Lou Marino, MD

Slater Award continued

to make it available to people with disabilities and with behavioral health conditions. He has been a strong supporter for providing annual cost of living adjustment for home and community care providers providing mental health services.

In addition, in 2004, the Lt. Governor hosted a policy forum on behavioral health entitled, “Behavioral Health 2004: Issues and Challenges for Public Policy,” which addressed the critical issues affecting the delivery of services to those with mental health illnesses. ❖

Co-Editor Wanted!

Are you interested in working on the award-winning RIPSNews? We are seeking a Co-Editor for the newsletter. If you are interested, please contact Jay Thornton, MD, at 789-1367 ext 3111 or email jayt@ssmhc.org.

General Membership Meeting February 2005

At the Society's General Membership Meeting held at L'Epicureo restaurant, Dr. Wall presented "Some Wear Suits, Some Wear Stripes: The Psychopath in Society". He provided an overview of the antisocial spectrum of behavior. He made a distinction between antisocial behavior that does not meet criteria for antisocial personality disorder (APD), APD itself, and psychopathy. He reviewed common treatment issues that arise when treating patients within this spectrum, and commented upon when—and when not—to attempt treatment. The presentation was followed by a lively discussion by other RIPS members about the social and biologic origins of antisocial behaviors as well as the need for adolescent treatment approaches to foster pro-social behaviors. ❖



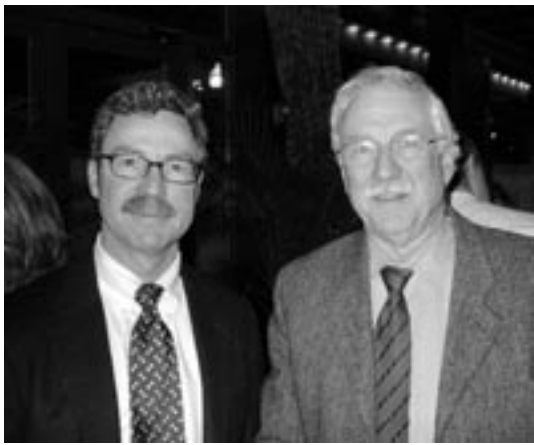
(left to right) Joseph Penn, MD; Barry Wall, MD



(left to right) Jim Greer, MD; Mickey Silver, MD; Russell Pet, MD



(left to right) Achina Stein, DO; Ben Greenberg, MD



(left to right) David Kroessler, MD; James Bonnar, MD



(left to right) Lisa Shea, MD; Richard Wagner, MD



(left to right) Wilma Rosen, MD; Laura Levine, MD; Lowell McRoberts, MD; Paul Sapir, MD



(left to right) Pat Recupero, MD; Lou Marino, MD

Join the Rhode Island Medical Society Now

Barry Wall, MD
Past President

If you are not a member of RIMS, you should be.

RIMS policy is that at least 50% of the members in each of the 22 specialty societies represented in the Council must also be RIMS members as a condition of that specialty retaining its council seat. RIPS has never come close to compliance with the “50% rule” but has nevertheless retained its seat and its vote because medical colleagues appreciate the indispensable importance of RIPS’ perspective to medicine. It is a shame that RIPS should have to rely upon the charity of the rest of the profession.

Joining RIMS is a matter of advocacy. Advocacy and diplomacy at the RI General Assembly, to the Governor, before the Department of Health, the Board of Medical Licensure and Discipline, to Blue Cross, to United, to Medicare, to Medicaid, to liability insurers, to the media and to the public is a huge and never-ending job that absolutely needs to be done. RIMS is effective, as we have seen and are seeing; for example, just think of the recent fee increases garnered from United. As a practical matter, doctors need a single statewide all-specialty organization to represent them and their concerns credibly within the state. RIMS must be strong: strong in numbers (therefore representative and credible) and strong in resources (dues).

Joining RIMS is a matter of professionalism. Whatever is important to you as a person and as a doctor, RIMS is a vehicle for accomplishing it. Chances are, RIMS is already doing it—and could do more of it better with you as a member: Reimbursement, regulation, liability, quality care, patient safety, peer review, continuing medical education, children’s health, women’s health, professional ethics, image of the profession, health information technology, etc. Membership in RIMS is an easy and painless way for physicians to meet their professional obligations to their patients, their colleagues, the profession and society; those obligations go beyond the daily routine of direct patient care—but who has time? That’s why we have professional associations. You’re not a part of the medical community if you don’t belong to your state medical society.

Joining RIMS is a matter of professional unity and solidarity. RIMS is run by and for doctors. All doctors have an obligation to support the organization and the colleagues who are working for them. The colleagues—scores of them—who work through RIMS on behalf of all physicians and their patients are all volunteers. None, not even the President, is compensated for the time they give and the income they forego. The work they do benefits everyone. Being a faithful, dues-paying member is a minimal commitment. Membership is the least that should be expected of every doctor, and that every doctor should expect of him/herself.

Joining RIMS helps advance the causes of mental health. RIMS actively and successfully promotes solidarity, collegiality and strength among the mental health community to an extent that may be unique in the nation. This collaborative approach has been successful in advancing such issues as fair reimbursement and mental health parity, and it has immunized Rhode Island against such destructive issues as prescriptive privileges for psychologists. RIMS has been a collaborative and tenacious champion of mental health parity and has been instrumental in putting RI on the forefront of that struggle nationally. RIMS has been forceful and effective in representing the interests of psychiatrists and other mental health professionals with regard to fair reimbursement and reasonable treatment from United Healthcare and United Behavioral Health. The battle continues.

The bottom line is that membership in RIMS is important because RIMS is unique. In the words of LBJ, “It’s the only state medical society you’ve got.” RIMS is effective in working for doctors and patients, but its effectiveness depends on and varies with numbers of members and adequacy of resources. RIMS is responsive and responsible and its leaders are open-minded and conscientious. One member with good ideas can have a great impact. At 192 years old, RIMS remains a ready vehicle for what needs to be done. We need to maintain the vehicle and use it for our present and future needs, whatever they may be. RIMS deserves the support and confidence of all doctors, as the gains made by the medical community within the past 3 years strongly demonstrates that. ❖

To join RIMS, go to www.rimed.org, and click on “Application form” underneath the words “Apply Online to Become a Member,” which is on the left side of the main webpage. If you join RIMS right now, your \$450 membership fee will cover dues for the rest of 2005 and all of 2006.



Legislative Update

Michael Silver, MD
Legislative Chair

The APA Advocacy meeting in Washington was extremely well organized and very well done. Ninety representatives, mostly legislative reps, from around the country were there and we all spent Tuesday on Capitol Hill lobbying our respective Congressmen and Senators. Jay Scully, the new chief medical officer of the APA apparently got the funding approved for the conference (not originally in the budget).

Here are the issues that the APA is focusing on and some information regarding these issues.

1. Proposed Medicaid Cuts: A huge problem—40% of the Medicaid recipients either have a mental illness or dementia. President Bush's cuts would devastate the RIte Care program in Rhode Island. Republican Senator Smith of Oregon (whose son had a bipolar illness and committed suicide) proposed and got passed an amendment which would block the cuts and instead create a study commission to thoughtfully look at ways to control the costs in this program. Senator Chafee was one of the few Republicans who supported the amendment.

2. Federal Mental Health Parity Legislation. Last year this legislation passed the Senate by a large margin. There were enough votes to also pass in the House but Majority Leader Representative Hastert blocked the introduction of the bill on the floor, so it never came to a vote. He is allegedly opposed to mandates. It will be introduced again this year.

3. Ending the 50% Medicare co-pay for mental illness-related treatment. Most agree that this is discrimination and makes no sense; however it is an additional cost when the budget is very tight.

4. Amendment to the Drug Treatment Act. Currently a physician can only treat 30 patients with Buprenorphine (a partial opioid agonist). Any group of doctors can treat only 30 patients. This amendment would remove the group limitation and allow each doctor in a group to have 30 patients.

5. The Keeping Families Together Act: Introduced by Representative Patrick Kennedy, this act would prevent families from having to give up parental rights to their children in order for them to access residential services or other services that are paid by Medicaid.

6. Mental Health Screening: The bill says that no federal funds can be used for mandatory, nonconsensual mental health screening. Of course nobody supports having mandatory, nonconsensual mental health screening. The bill is supported by Scientologists. Obviously the APA is against it.

7. Clinical Trials: The APA supports any and all bills that require drug companies to publish the results of ALL clinical trials on a mandatory, publicly accessible national registry.

8. HIPAA: The APA supports some changes to the HIPAA privacy act involving some marketing loopholes where information has been sent to offshore entities.

9. Genetic Non-Discrimination Act: The APA supports this act, so insurance companies can't raise your rates based on your genes.

10. And last but not least—The Medicaid Psychiatric Hospital Fairness Act: Free standing psychiatric hospitals (e.g. Butler) are required by the EMTALA anti-dumping law to stabilize patients having an emergency medical condition. However if the patient has Medicaid they will not be paid because of the Institute of Mental Disease exclusions preventing paying for those 18 to 65 years old. This law would allow for payment in emergency situations. ❖

Committee on Women

Alison Heru, MD

Help End Pharmacist Refusals

Some ideologues have long wanted to deny women the right to use birth control. What's new is that some state legislators want to pass laws to protect pharmacists who use their position to do so. We can't let them. Legislation is now pending in both houses of Congress that would ensure that pharmacist's responsibility to their customers was placed ahead of their "personal beliefs." Please take a minute to contact your representative and senators to ask that they cosponsor the Access to Legal Pharmaceuticals Act.

Take Action!

Send a letter (see sample) to your Congressperson and your Senators, or follow this link to take action:
http://actionnetwork.org/campaign/pharmacist_refusals/biinub4q5jnkek

What's At Stake?

All across America, women are facing a disturbing new threat to their right to use birth control; pharmacists who, citing personal objections, simply refuse to fill prescriptions for contraceptives. Even more outrageous, some state lawmakers are proposing new laws to protect those pharmacists from being disciplined in any way.

Here are just some examples of the outrageous action by some pharmacists:

- March 2004, Texas: a rape victim attempted to fill a prescription for emergency contraception at a Denton, Texas Eckerd Store. Gene Herr, along with two

other pharmacists, denied the woman access to the pills, citing moral and religious convictions. A friend of the rape victim explained that the decision to deny the pills amounted to a second victimization: "I knew I was going to have to go out to that car and say, 'Sorry, you know, morally they say you're wrong.'"

- April 2004, Texas: Julee Lacy, a 32 year old mother of two went to her local CVS in North Richland Hills to refill



her prescription for birth control pills. Citing his "personal beliefs," the pharmacist refused to provide her with her pills. Later he told Ms. Lacey's husband that he would not fill the prescription because oral contraceptives are "not right."

Subject: Support Access to Birth Control

Dear [name of decision maker],

I am disturbed by reports of pharmacists across the country refusing to fill prescriptions for birth control. This is just plain wrong. I urge you to cosponsor the Access to Legal Pharmaceuticals Act (S.809/H.R.1652) to ensure that no customer seeking prescription contraception is turned away by a pharmacy. Pharmacists have a responsibility to provide their customers with the medicines prescribed by their doctors. They have no right to substitute their own moral judgment for that of the customer or the medical judgment of a physician. In addition to being unethical, pharmacist refusals are completely out of step with the needs and wishes of the American public.

Fully 95% of American women use birth control at some point in their lives and more than 80% of Americans say pharmacists who personally oppose birth control for religious reasons should provide it anyway. Denying patients the right to medical care prescribed by their own physician should not be tolerated. Again, I urge you to cosponsor S.809/H.R. 1652.

Thank you for your attention to this important health care matter. I look forward to hearing from you on this issue.

Sincerely,
[your name]



Member Notes

• July 2002, Wisconsin: Amanda Phiede, a college student, went to a K-Mart in Menomonie to get her prescription for birth control pills. Pharmacist Neil Noesen asked her if she was using them for contraception, and when she told him yes, he refused to fill the prescription. When Ms. Phiede wanted to go to another pharmacy Noesen refused to transfer the prescription. Noesen has since been rebuked and had his license restricted by the Wisconsin Pharmacy Examining Board. But such disciplinary action would be prohibited under legislation proposed by groups and lawmakers opposed to birth control.

The Access to Legal Pharmaceuticals Act

This act (S 809/HR 1652) would require that pharmacists either fill all legal prescriptions or make arrangements to have someone else in the same store do so. A pharmacist's duty to the customer must take precedence over his or her personal beliefs. The law should ensure it does. ❖

This information comes from the Association of Women Psychiatrists website. Please visit the website at www.womenpsych.org.

We are pleased to announce the recognition of our colleagues who have received membership advancements.

WALTER BROWN, MD

Distinguished Life Fellow – A graduate of Duke University, Dr. Brown has been a member of the APA since 1973.

LYNN EPSTEIN MD

Distinguished Life Fellow – Dr. Epstein received her MD from Johns Hopkins Medical School. She first joined the APA in 1973.

HECTOR JASO, MD

50-Year Life Member – Dr. Jaso received his medical degree from the National Autonomous University of Mexico School of Medicine. He has been an APA Member since 1955.

C. BRANDON QUALLS, MD

Distinguished Life Fellow – A 31-year member, Dr. Qualls joined the APA in 1975. He received his MD from Case Western Reserve School of Medicine in Cleveland.

PAUL SHIELD, MD

Life Member – An APA member since 1971, Dr. Shield is a graduate of Swarthmore College and The University of Pennsylvania School of Medicine.

JAY THORNTON, MD

Distinguished Fellow – Dr. Thornton is editor of RIPSNews, which continues to be recognized at a national level. He has been a member of the RIPS Council for the past four years and has been elected as President-elect. He is currently Clinical Director of the Community Support Program of South Shore Mental Health Center and Clinical Assistant Professor of Psychiatry and Human Behavior at Brown Medical School.

BARRY WALL, MD

Distinguished Fellow – A past President of the Rhode Island Psychiatric Society, Dr. Wall has played a major role in revitalizing the Society and recruiting younger members to RIPS. He is a Clinical Associate Professor, Department of Psychiatry and Human Behavior, Brown University Medical School; and Director of Forensic Service, Eleanor Slater Hospital, Cranston. In addition, Dr. Wall currently serves in the leadership of the Rhode Island Medical Society, where he is Vice President.

We wish them congratulations and best wishes!

Mental Health Center News

SOUTH SHORE MENTAL HEALTH CENTER

Richard C. Antonelli, President & CEO Announces his Retirement after 36 years of Service at South Shore Mental Health Center.

The Board of Directors of South Shore Mental Health Center announce that Richard C. Antonelli, President & CEO, has retired. Mr. Antonelli assumed the position of Executive Director of what was then the Washington County Mental Health Clinic in 1968. The name of the organization was changed to South Shore Mental Health Center in 1990, and Mr. Antonelli's title was later changed to President/CEO.

Kenneth Andrew, Chairman of the Board of Directors, states, "The Board and the community are losing a great asset. Dick has led the Center through years of growth and service diversification from a small outpatient clinic to a comprehensive community mental health center. His knowledge of mental health and his commitment to those coping with mental illness is like no one else's in South County. We are extremely sad that Dick is retiring."

Richard C. Antonelli, President & CEO at South Shore Mental Health Center, states, "I am happy to have been part of such a great organization and will miss so many people at the Center and in the community. It has also been my good fortune to have been part of the development of a statewide and nationally recognized system of care for the mentally ill that covers the entire state. The mental health community has seen so many changes since I've started, and I believe people experiencing a mental illness today have a better chance of living a full and productive life in the community."

South Shore Mental Health Center Welcomes New President and Chief Executive Officer

The Board of Directors of South Shore Mental Health Center are pleased to announce that W. Michael Johnson has been chosen as the Center's new President & CEO.

Previously, Mr. Johnson served as Chief Executive Officer

for 5 years at Chelan-Douglas Behavioral Health Clinic in Wenatchee, WA. Before becoming CEO at Chelan-Douglas, Mr. Johnson has served as hospital administrator, and clinical director in both the private and public sector and as an international consultant for mental health and drug and alcohol program. Mr. Johnson has over 28 years of knowledge and experience in the behavioral healthcare setting.

W. Michael Johnson, President & CEO states "I look forward to the challenges that lie ahead. South Shore Mental Health Center has an excellent reputation for helping people in the community, and I am honored to be a part of this organization. As President & CEO, I hope to continue to build relationships with the local hospitals, healthcare centers and the community at large to continue to provide the much-needed services."

South Shore Mental Health Welcomes a New Child and Adolescent Psychiatrist

The Board of Directors and Staff of South Shore Mental Health Center are pleased to announce Henry B. Mann, M.D. as the Center's new child and adolescent psychiatrist. Dr. Mann brings an impressive educational background as a graduate of Tufts University in Medford, Massachusetts and Yale Medical School in New Haven Connecticut. Dr. Mann did his internship in Pediatrics at Hospital of St. Raphael, Psychiatric Residency at Yale School of Medicine and a Fellowship at Yale Child Study Center. He has held positions as Medical Director, Joshua Center Southeast in Montville Connecticut; Chief, Child and Adolescent Inpatient and Day Hospital Inpatient Services, Elmcrest Psychiatric Institute; and has numerous years of private practice along the Connecticut Shoreline.

Dr. Mann will provide outpatient services, clinical support to South Shore School and serve as support management to the Center's child and adolescent community-based programs and services.

THE PROVIDENCE CENTER

**The Providence Center Appoints
New Board Members**

The Providence Center, a community-based, outpatient behavioral health organization, today announced the following new board member appointments:



Frank Casale, Jr.

Frank Casale, Jr. brings over 18 years of business experience to The Providence Center's Board of Trustees. In his current position as Senior Vice President of Sovereign Bank in Providence, RI, Casale is responsible for the development and management of a multi-million dollar Business Banking portfolio. Casale has volunteered on numerous committees, most recently

serving on the Board of Trustees of the Ocean State Business Development Corp., Meeting Street Center, and the Meeting Street Center Fiscal Policy Committee. He is also an Ambassador of the Greater Providence Chamber of Commerce.

Joel N. Stark brings over 32 years of business experience to The Providence Center's Board of Trustees. In his current position as a non-profit and small business consultant, Stark works with organizations in all aspects of business development. Stark has volunteered on numerous committees, serving on the Board of Trustees and as Chair of the Providence Public Library. For Trinity Repertory, Stark serves on the Board of Trustees and as Chair of the Strategic Planning Committee. He is a member of the Advisory Board at the Center for Design and Business and has served as Chair of the "Success by Design" Conference Committee for the past six years



Joel N. Stark

**The Providence Center To Implement
Innovative Mental Health Screening
Program For Teens**

The Providence Center has been selected by Columbia University as Rhode Island's first site to implement the "Columbia University Teen Screen Program." The goal of the program is to identify mental health problems in teens, such as depression, and facilitate intervention. Currently, Providence Center is the only organization in the state approved to implement this screening tool.

Using a confidential, computer-based questionnaire that asks about a variety of issues, including self-esteem, depression, and suicidal thoughts, The Providence Center will work with local schools to identify teens who are experiencing a mental illness, or are at risk for suicide, as well as link them to appropriate treatment.

With parental and student consent, The Providence Center will initially use the screening tool at schools in which it is already providing mental health services. For students who show evidence of a mental illness or suicide risk, The Providence Center's specialized child-trained clinicians will work with the student, his/or her family and school personnel to facilitate treatment. Rhode Island is the forty-second state to implement this program. ❖

APA Alliance Grows in Activities and Membership

Mary D. Thurrell

President-elect, National APA Alliance

For the past 21 years, the APA Alliance has supported the goals of the APA and has advocated for people with Mental illness. The Alliance welcomes and is seeking new members, Membership is open to spouses, significant others, family members, and others active or interested in the mental health arena.

The American Psychiatric Association Alliance is a non-profit 501(c)(3) tax-exempt organization. Members are located in all 50 states, and members in some states have formed chapters in order to work closer with district branches of the APA.

The APA Alliance engages in charitable, advocacy, and educational endeavors that support the mission and goals of the APA, while bringing into closer fellowship the

families of the APA and the Alliance. Members of the APAA promote mental health education and the prevention and treatment of mental illness in underserved populations, at the community, state, and national levels.

Projects conducted by APA Alliance members include Mental Illness Awareness Week, "When Not to Keep a Secret" High School Essay Project (co-sponsored by the APA), the "Call to Protect" program, "National Media Watch," "National Legislative Network" and a quarterly newsletter publication.

Charitable endowments sponsored by the APA include the Elsa Barton Scholarship (to support families of impaired physicians by providing post-secondary education scholarships) and the Robert E. Jones Foundation, (co-sponsored by the APA) which aids families of impaired physicians in times of crisis.

The Alliance advances the goals of the APA and advocates for people with mental illness by collaborating at the community and national levels with other like-minded organizations, such as the AMA Alliance. Forming collaborations is an ongoing endeavor of the APA Alliance. Other organizations with which the APA Alliance collaborates are: The Yellow Ribbon Youth Suicide Prevention Program, National Coalition Against Domestic Violence, Parent Teacher Organizations, National Alliance for the Mentally Ill, community clinics and hospitals, mental health associations, and educational associations.

At the APA Annual Meeting, the APA Alliance hosts a luncheon for Alliance and APA members with a nationally or internationally prominent speaker. The Alliance also organizes a joint workshop and scientific symposium at the APA Annual Meeting, attended by APA and APAA members.

In order to increase the Alliances relationship with the district branches, and to provide support to each others programs, the APA Alliance would like to hear from people who would act as a liaison between the APAA and their district branch. They can write this on their application for membership or respond to the email address or P.O. Box number below. ❖

Please visit our web site at www.apaalliance.org.

Membership applications and current news letters are available on the web site. People may also make requests or ask questions by email to ang3689@aol.com, or write to P.O. Box 285 North Boston, NY 14110.

Join the Rhode Island Medical Society!

RIPS needs members to join the Rhode Island Medical Society to maintain its seat on the RIMS Council, which requires 50% of active members in RIPS to be members of RIMS.

In addition to Council representation, RIMS members receive many other benefits, including:

- **Free Publications**
- **Insurance services**
- **Benevolence Fund**
- **Brown University Library privileges**
- **Free websites for medical practices**
- **Continuing Medical Education**
- **Referrals**
- **Distinctive listing in Folio's Medical Directory**
- **Representation, advocacy and opportunities**

To join the Rhode Island Medical Society, visit the website, www.rimed.org, or call the Society's office at 331-3207.

Opportunities

Correctional & Forensic Psychiatry

The University of Massachusetts Medical School seeks psychiatrists for its innovative and multidisciplinary correctional mental health program, which provides services at several locations throughout the state. We offer a generous salary, excellent benefits, regular hours without call responsibilities, and a faculty appointment with the University of Massachusetts Medical School. UMMS is an equal opportunity employer. Send letter of interest and curriculum vitae to:

Kenneth Appelbaum, MD

University of Massachusetts Medical School
Health & Criminal Justice Programs

1 Research Drive, Suite 120C

Westborough MA 01581

Kenneth.Appelbaum@umassmed.edu

508-475-3236

Fax 508-475-3258

Full-Time Psychiatrist

Newport County Community Mental Health Center, a not-for-profit, JCAHO-accredited, licensed organization providing a full range of behavioral health services since 1964,

welcomes applications from Board-certified or Board-eligible Psychiatrists who hold or will qualify to hold a medical license in the State of Rhode Island. The position is in service to adults, requiring both in-patient and out-patient care/treatment and offers a competitive salary and fringe benefits (health insurance, liability insurance, participation in pension plan, and paid vacation, holiday, and sick leave.) We are very much a team-oriented and team-focused organization that salutes the highest standards of care while always supporting each other in providing service. We are located in one of the most ocean-scenic, history-rich, and artistically-sophisticated areas of the country, replete with music festivals, sailing races, museums, mansions, pollution-free air, and great seafood restaurants. Please send your resume and salary requirements, in confidence, to:
Human Resources Administrator
Newport County Community Mental Health Center
127 Johnnycake Hill Road
Middletown RI 02842.
Visit our website at www.nccmhc.org.

Staff Psychiatrist

Brown University Psychological Services seeks to hire a Staff Psychiatrist, working full-time September–May and one day/week in June, July, August. Review of applications begins immediately and continues until position is filled. For further information, and to apply, see: <https://careers.brown.edu>.

LPS Billing Service, Inc.

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Billing Administrator
401-334-1832

You have just been subpoenaed.

Do you know how to respond?



If you have your malpractice insurance through The Psychiatrists' Program you can rest assured. With a simple toll-free call, a risk manager can assist you with the immediate steps you need to take to protect your practice.

As a Program participant, you can call the **Risk Management Consultation Service (RMCS)** to obtain advice and guidance on risk management issues encountered in psychiatric practice. Staffed by experienced professionals with both legal and clinical backgrounds, the RMCS can help prevent potential professional liability incidents and lawsuits.

If you are not currently insured with The Program, we invite you to learn more about the many psychiatric-specific benefits of participation. **Call today to receive more information and a complimentary copy of "Six Things You Can Do Now to Avoid Being Successfully Sued Later"**

THE PSYCHIATRISTS' PROGRAM

The APA-endorsed Psychiatrists' Professional Liability Insurance Program

Call: 1-800-245-3333, ext. 389 ~ **E-mail:** TheProgram@prms.com

Visit: www.psychprogram.com

(In California, d/b/a Cal-Psych Insurance Agency, Inc.)

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