

The PsychList

~A modern "spin" on UBMD Psychiatry news and events~



A Note from the Chair...



Steven Dubovsky, MD,
Department Chair

In addition to the usual excellence of presentations and discussion, our September conference was particularly notable because it was the first in-person event most of us- and all our national guests- had attended in 18 months. The range of feelings about a live meeting mirrored what you see in all settings. One speaker decided at the last moment that taking a one-hour flight to Buffalo was too risky and said he could only participate virtually. Some other speakers overcame their anxiety about traveling and interacting with a moderately sized group inside, and became progressively more comfortable as the event proceeded. Some people wore masks; some did not. Some people sat close to each other, and others kept their distance. We did not insist on proof of vaccination, and no one knew who was or was not vaccinated. And no one got sick.

Here's what was missing from the conference: There were no expresses of anger or devaluation from people on opposite sides of the current debate about the implications of COVID-19 being fueled by the media. In fact, feelings were not in attendance about whether or not civilization is coming to an end, whether mandates are necessary to save our lives or an instrument of political dominance, or whether anyone who does not agree with our personal ideology is a traitor. Any intensity of interchange of knowledge was characterized by light rather than heat. No one thought that contrary clinical approaches indicated stubborn or malign ignorance. We were all interested in learning from each other, and I believe that most of us came away from the conference having heard something we had not heard before.

In my opinion, our behavior at the conference could serve as a model to all scientific clinicians- in other words, clinicians who enjoy learning something they did not already know and hearing about opposing points of view. It is the ability to put aside our reactions to the tensions that pollute the current intellectual environment and engage in open intellectual interchange that promotes our own growth as professionals and the breadth of knowledge we can offer our patients.

Congratulations and a **job well done** to Dr. Sergio Hernandez and Leanne Hatswell on maintaining 100% compliance with the Jacob's School of Medicine grading policy and requirements for LCME accreditation, as demonstrated through the Block 1A PTY700 Audit. This included:

- ◆ **Grades:** All completed in 16 days
- ◆ **Mid-Clerkship Feedback Forms:** 100% submitted
- ◆ **Mini-CEX Forms:** 100% submitted
- ◆ **Passports:** 100% completed (all RCEs have been completed by all students, 0 simulations)

As noted, your organization and complete documentation made the audit process fast and easy!

Inside this issue

Residency News.....	2
Psychiatry Conference.....	3
Employee Spotlight.....	4-5
Coding.....	6

Special points of interest

- Special Recognition
- AACAP Award Winner

American Academy of Child & Adolescent Psychiatry (AACAP) Simon Wile, MD, Leadership in Consultation Award

Submitted By: Beth Smith, MD

Dr. David Kaye was awarded the prestigious *American Academy of Child & Adolescent Psychiatry (AACAP) Simon Wile, MD, Leadership in Consultation Award*. This award acknowledges outstanding leadership and continuous contributions in the field of consultation-liaison psychiatry. This is recognition of Dr. Kaye's tremendous work over the past decade in leading and growing a public health model for child psychiatric consultation for primary care providers throughout New York state. Dr. Kaye will be presenting an honors talk, "*Child Psychiatry and Pediatrics as BFFs: Why pediatric primary care is, must, and will be foundational in addressing the mental health needs of children and adolescents,*" at AACAP's 68th Annual Meeting on October 28, 2021.



In 2010, Dr. Kaye conceptualized and implemented CAP PC (Child and Adolescent Psychiatry for Primary Care) to support primary care providers across New York State in the management of children with mild-moderate mental health disorders and to provide linkage and referral support. CAP PC is a regional provider for Project Teach funded by the NYS Office of Mental Health (covering Regions 1 and 3, i.e. 80% of the population of New York State!). Dr. Kaye leads this large-scale collaborative consultation program across a consortium of 5 university-based child psychiatry divisions at the University at Buffalo, University of Rochester, SUNY Upstate Medical University in Syracuse, Columbia University Medical Center/NY State Psychiatric Institute, and Hofstra/Northwell Health. In 2017, CAP PC was awarded the *Psychiatric Services Achievement Bronze Award* from the American Psychiatric Association and AACAP's *Norbert and Charlotte Rieger Service Program Award for Excellence*.

Since its inception, this program has provided over 27,000 hours of CME to pediatric primary care providers on evidenced based, best practice information, consulted on over 13,000 cases, and has increased access to mental health care in primary care practices across New York. Much of this is due to Dr. Kaye's vision, dedication, and leadership. To accomplish all of this is extraordinary and worthy of honoring!

Please join me in congratulating David!

Residency News

Submitted By: Cynthia Pristach, MD

Much has been happening in the General Psychiatry Residency Program! Dr. Huma Baqir, PGY-3, has received one of the five inaugural awards for GME Social Justice and Healthcare Equity to aid with developing and implementing the LGBTQ Mental Health Curriculum for Psychiatry Residents. Reviewers were impressed with her longstanding commitment to medical education and human rights, and her well written and referenced application. Dr. Baqir has developed a creative, four-part curriculum to teach residents about issues unique to the LGBTQ population, and hopes to expand it to other residency programs. Congratulations, Huma!!

On Thursday, September 30th, the residents participated in the first community retreat as part of the Allyship Curriculum. Residents toured the Michigan Street African American Heritage Corridor, and learned about challenges that people living in the Michigan Street Corridor have faced, and continue to face. They were also introduced to the many contributions and accomplishments of community members in the areas of social justice, business, and the arts and civil rights, both in the past and present.

Many thanks to Drs. John Improta and Laura Hanrahan for your service on the Clinical Competency Committee! This important committee evaluates and rates residents on the ACGME Milestones. We are happy to welcome our new members, Drs. Matthew Ruggieri and Sarah Gibson!

The Program Improvement Committee is made up of residents from all years of training as well as the program administration. The Committee has developed surveys which will be administered quarterly to residents to monitor satisfaction in several areas, and to elicit solutions to identified problems. Thanks to all committee members who are hard at work to address resident concerns and make program improvements!



16th Annual Comprehensive Review of Psychiatry



After a year-long hiatus due to COVID, the 16th Annual Comprehensive Review of Psychiatry was held September 9-10, 2021 at The Mansion on Delaware in Buffalo. As one might imagine, putting on a conference during a pandemic was quite the undertaking. The program directors—Dr. Steven Dubovsky, and Dr. Josie Olympia, along with staff members Angela Bella and Kathy Benz, did a fantastic job coordinating this year’s conference while adhering to COVID protocols. Approximately 100 were in attendance, including psychiatrists, primary care physicians, nurse practitioners, psychologists, social workers, and other health care professionals.



“Save the Date”
 Next year’s conference will be held on September 8-9, 2022. We hope to see you there again next year!



Official Titles
NYS Licensed Psychologist
Research Assistant Professor
Coordinator of Continuing Education for Psychology

Date of Hire
May 2019



Stephanie Ficarro, Psy. D

Stephanie Ficarro, Psy. D., discusses her position within the Practice below:

Q: Where do you specifically work?

A: The majority of my direct clinical work takes place in both the adult and juvenile county correctional systems. My time is generally spent between the Erie County Forensic Mental Health Service (ECFMH), the Erie County Holding Center, the Erie County Correctional Facility, and the Erie County Youth Services Center. My clinical work involves conducting court-ordered mental health evaluations and Article 730 competency evaluations, as well as other evaluations requested from the criminal justice system. In the adult facilities, I complete clinical rounds on the constant observation units and work directly with clinical staff to provide care to inmates with serious mental illness. At the Youth Services Center, I provide both individual and group treatment services to a population that is comprised primarily of adolescents. I also conduct psychological assessments with incarcerated youth and adults and track clinical outcomes over time. Additionally, our group conducts research using this information on an ongoing basis. I also provide clinical supervision to undergraduate and graduate level students, residents, and fellows.

Q: You played a big part in obtaining continuing education (CE) credit for psychologists - can you go into more detail about this and explain the importance/significance?



A: As of January 1, 2021, licensed psychologists are now required by the New York State Education Department to complete 36 hours of formal continuing education (CE) during each three-year licensure registration period. It is surprising to think that this is a new requirement for licensed psychologists in our state, as many other states have required psychologists to complete CE credits to maintain licensure for quite some time. As with continuing medical education (CME) for physicians, it goes without saying that continuing education for psychologists is critical to ensuring effective practice, teaching, and supervision. It enables psychologists to keep pace with the most current scientific evidence regarding assessment, intervention, and education, as well as relevant legal, statutory or issues. It also encourages psychologists to maintain, develop, and increase competencies in order to improve services to the public and enhance contributions to the profession. Given that the Department of Psychiatry already offers such excellent educational activities for physicians and medical trainees, such as the Psychiatry Grand Rounds Series and the Comprehensive Review of Psychiatry Conference, it seemed like a no-brainer to also offer these as opportunities for psychologists to earn CE credits. After a long and meticulous application process, in June of 2021, the Department of Psychiatry was approved by the New York State Education Department's State Board for Psychology as a provider of CE for licensed psychologists. I am so proud to have been a part of this accomplishment for the Department and excited to be involved in continuing to develop the CE program for licensed psychologists in the future.



The Nuts and Bolts of Precepting



Q: How do you balance the challenge of teaching and precepting students?

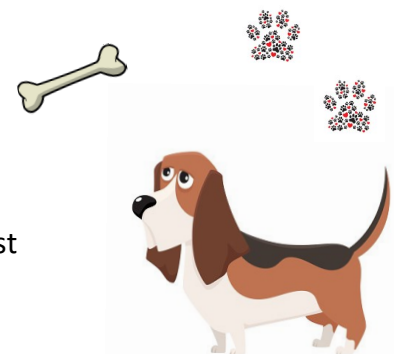
A: Since entering into independent practice several years ago, I have learned to appreciate how challenging it can be to balance one's clinical work and duties as an educator, supervisor, and mentor. In my experience so far, I have found it to be particularly helpful and important to include students and trainees as members of the treatment team and encourage them to approach their clinical work with an enthusiastic curiosity to learn. I also find that taking a collaborative approach to education and supervision, where the student and I exchange ideas and collectively agree upon a course of action, to be particularly effective in empowering trainees and fostering the supervisory alliance. Additionally, I believe that professional development is a life-long learning process, and given this, I also continue to learn from the students and trainees that I work with, whose input and feedback are instrumental to my growth as an educator.

Q: What do you feel is the most challenging aspect of your job? The most rewarding?

A: Some of the most challenging aspects of my work relate to those that inherently exist within forensic settings, such as logistical barriers to providing clinical care within secure correctional facilities. Additionally, navigating the challenges that exist between the mental health and criminal justice systems can at times make it difficult to effectively meet the needs of the populations we serve. The rewarding aspects of my job involve being able to help others in multiple ways, including rehabilitating incarcerated individuals, assisting with the diversion of individuals with serious mental illness from entering or re-entering the criminal justice system, and educating the court in regard to mental health-related issues. However, I would have to say that the most fulfilling part of my job is being able to work with and mentor students and trainees. Having the opportunity to help facilitate and observe trainees' professional growth and development as clinicians and practitioners has been invaluable.

Q: What are your interests outside of work?

A: Outside of work, I enjoy spending time with my husband, Zach, and our 1-year-old basset hound puppy, Wally. In my free time, some of my favorite hobbies include hiking, reading crime fiction, binging HGTV, and attempting to bake. Since the pandemic has encouraged many of us to explore new hobbies, I have recently taken up calligraphy, which has very quickly led me to appreciate why hand-lettered wedding invitations in fact cost a small fortune.



Thank you, Stephanie!



Submitted By: Agnes Macakanja, BA, CPC

Choosing Add-on Codes Properly: CPT Coding for E/M Visits with Psychiatric Care

Reporting CPT codes for psychiatric care accurately can be challenging when these services are provided with a primary E/M service. Be aware of the documentation standards and guidelines including psychotherapy and psychiatric diagnostic evaluations.

Tips to Report E/M and Psychotherapy

Follow the official coding guidelines from the CPT manual:

“Some psychiatry services may be reported with evaluation and management services (99202-99255 outpatient office, 99281-99285 ER/CPEP may be reported for treatment of psychiatric conditions) rather than using psychiatry service codes, when appropriate.”

Before reporting an E/M code with psychiatric care, be sure to document history, physical examination, and medical decision-making (MDM) to support the additional services.

Example: CPT code 90791 (psychiatric diagnostic evaluation) includes documentation of the patient’s history and diagnostic assessment or reassessment. Do not count these services twice. If a service is already included in one code, you cannot use the same documentation to support an additional code.

Billing Psychotherapy codes:

Individual psychotherapy is provided to a patient through re-education, support and reassurance, insight discussions, and sometimes medication to affect behavior modification through self-understanding, or to evaluate and improve family relationship dynamics.

You may report individual psychotherapy services with other E/M services. These are add-on codes 90833, 90836, 90838, which are used to report psychotherapy with an E/M service.

Per CPT: “For the purposes of reporting, the medical and psychotherapeutic components of the service may be identified as follows: Type and level of E/M service is selected first based upon the key components of history, examination and medical-decision making.”

Consider this guidance for choosing E/M: CPT 99202-99215 (office or other outpatient services); Coding for outpatient visits is based on MDM: Straightforward, low moderate or high level. Effective January 1, 2021, code may be chosen based on time spent on the encounter.

CPT guidelines also state:

“Time associated with activities used to meet criteria for the E/M service is not included in the time used for reporting the psychotherapy service (i.e., time spent on history, examination and medical-decision making when used for the E/M service is not psychotherapy time). Time may not be used as the basis of E/M code selection and prolonged services may not be reported when psychotherapy with E/M (90833, 90836, 90838) are reported.”

Time may be used to determine level of E/M code when “counseling and coordination of care” has been documented to comprise more than 50% of the encounter.

If a qualified provider provides E/M services along with psychotherapy, the appropriate E/M code must be determined by the level of MDM. Time cannot be used to determine E/M when E/M and psychotherapy are both reported as described in the 2021 E/M guidelines.

Finally, the CPT guidelines for psychotherapy state that a separate diagnosis is not required for the reporting of E/M and psychotherapy on the same date of service.

Quotable Quotes

"Before you criticize someone, you should walk a mile in their shoes. That way when you criticize them, you are a mile away from them and you have their shoes."

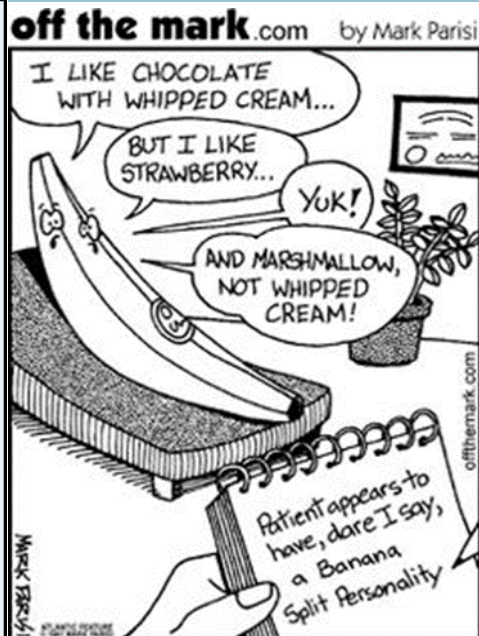
-Jack Handey

"The difference between stupidity and genius is genius has its limits."

-Albert Einstein



Comic Corner



Become Involved—Participate in Clinical Research!

Submitted By: Margaret Uebler-Otoka, Administrative Assistant

Participating in research doesn't just benefit our patients, but it also helps to advance healthcare for our entire community!

To learn more about trials happening in the Department of Psychiatry, check out the following sites:

[Long Acting Injectable Medication Study for People with Schizophrenia](https://www.research.buffalo.edu/portal/clinicaltrial/protocol/16870)
(<https://www.research.buffalo.edu/portal/clinicaltrial/protocol/16870>)

[Borderline Personality Disorder Trial](https://www.research.buffalo.edu/portal/clinicaltrial/protocol/17040)
(<https://www.research.buffalo.edu/portal/clinicaltrial/protocol/17040>)

[Patients with Bipolar Disorder](https://www.research.buffalo.edu/portal/clinicaltrial/protocol/14844)
(<https://www.research.buffalo.edu/portal/clinicaltrial/protocol/14844>)

[Schizophrenia and Cognitive Impairment Medication Trial](https://www.research.buffalo.edu/portal/clinicaltrial/protocol/11103)
(<https://www.research.buffalo.edu/portal/clinicaltrial/protocol/11103>)

To search all clinical trials happening at UB, check out this site:

[Participate in Research](https://www.research.buffalo.edu/portal/clinicaltrial/)
(<https://www.research.buffalo.edu/portal/clinicaltrial/>)

If you have a patient who may benefit from participating in a Department of Psychiatry study, or if you have questions, please reach out to:

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Calling All Writers...

If you would like to contribute to future editions of the quarterly UBMD Psychiatry Newsletter, please contact Julie Mikula at juliemik@buffalo.edu or at (716) 898-3597. All submissions must be received on or before December 17, 2021 to be included in the next edition, published in January 2022.

Thanks, in advance, for your input!

