

# Maine Psychologist Today

Welcome to the Maine Psychologist Today, MePA's new online newsletter!

### President's Message



Dear Colleagues:

Well, it's "summertime summertime sum-sumsummertime." Do you recall this 1958 hit by "The Jamies?" If not, I get it; I'm dating myself! My summer has begun with a two-week stay of my two grandchildren. My 11-year old

granddaughter has reached the developmental stage of "eye-rolling" me during my senseless humor. My seven-year old grandson still chuckles while making "body sounds." Ah life!

As you know, our dear Executive Director, Sheila Comerford, is retiring this August. Personally, Sheila has been an invaluable resource to me as I negotiated the MePA Presidency role these past 2 years. I am certain that others have similar memories/feelings regarding her most professional role as Executive Director. We celebrated Shelia's service with an open house at the Curtis Library in Brunswick on July 19th. If you didn't have chance to come and share your memories/accolades, we have some pictures of the festivities in this issue of the newsletter. A very thorough, competent and timegenerous Search Committee for Sheila's replacement led by Christine Gray, and including John O'Brien, Linda Monahon, Elyse Corbett, Josh Kingsbury and Sheila herself worked hard to find our next Executive Director. Speaking on behalf of the entire MePA membership, I heartily thank everyone on the Search Committee for your time commitment to this process, and for your personal commitment to the MePA organization and purpose.

As of this writing, I would like to welcome Amy Safford as our incoming Executive Director. Amy lives in Saco and has lots of great experience to bring to her new role at MePA, including working as the Director of Marketing for Maine Behavioral Healthcare. Amy will be mentored by Sheila during her first week on the job, and Sheila will be available to offer consultation to Amy as needed. Ah, so much to learn, but what a wonderful mentor. Thank you, Sheila and Amy! MePA has two exciting and relevant conferences scheduled for the fall. The first "Psychotherapy in a Tumultuous Sociopolitical Climate," is scheduled for September 20, 2019 and is presented by Michael Kramer, PhD and Tom Negron, PhD at the Fireside Inn Portland. The second conference, scheduled for November 15th at the Clarion Hotel in Portland will cover two topics: Anger Management for the morning session and Domestic Violence for the afternoon session. Stay tuned for further details about the November conference. The November conference also will have a graduate student poster session and we strongly encourage graduate student participation. So sign up and join us!

I am also happy to welcome Liv LiaBraaten J.D. from University of Maine, Orono as our new Student Representative/ Policy Council member.

Finally, please take a minute to review all the legislative bills in which MePA was involved this session. Your dues provide for this critical service for psychologists.

Until next time!

Most gratefully, Tom Collins

### Welcome New Members!

Tom Negron, Ph.D. Portland Delinda Mercer, Ph.D. Portland



## Don't Forget to renew your MePA Membership at <u>members.mepa.org</u>

There are 3 easy ways to choose from:

1- Online at <u>members.mepa.org</u>

- 2- Call the Office at 207-621-0732
- 3- Return the renewal form you received via email

## A Letter from the Outgoing Executive Director

#### Dear Friends:

As you know, my last day as the Executive Director of the Maine Psychological Association will be August 2. It has been 26 wonderful years!

Recently I sat in on the Search Committee interviews to hire a new Executive Director. It brought back memories of my very first experience with MePA. It was December 1992. I had a 6-month old baby and a toddler at home, and I had decided to re-enter the job market. I had heard that the Executive Director of MePA was leaving to take another position, so I did some research on the organization and sent off a letter of application. When I arrived at my interview at Colby College a dozen people sat waiting to question me....it was the entire Policy Council! I'd had plenty of interviews in my life but never with more than 3 people, so I was fairly intimidated! A week later, however, I was delighted to be offered the job. I was feeling pretty solid about myself until I found out later that I was actually the second choice-the first was a lawyer whose salary requirement was \$75/ hour. Apparently it wasn't my interview skills or my past experience that was most compelling-it was that I was a bargain!

Over the 26 years that I have been with MePA, I've worked with 21 Presidents, dozens of Policy Councils and committees, and hundreds of members. We've spent countless hours together solving problems concerning insurers, state programs, the Board of Examiners, ethical issues, legal issues, psychology's role in social issues and advocacy, legislation, continuing education, changing rules and so much more. During that time, I believe together we accomplished a good deal to be proud offrom successes in the legislative arena-mental health parity, two MaineCare increase bills, a bill establishing neurocognitive testing assistants as a reimburseable service, and getting rid of the 16visit limit. On the administrative side we organized 70 plus conferences, 25 annual meetings, oversaw the incorporation of the organization, the establishing of a political action committee, a listserv, a website, and a Records Registry to name a few.

Every few years during my tenure at MePA my husband would say to me, "Hey isn't it about time you get a full-time job and make some money?" I'd think a minute and say "No, I'm good". I knew that a job that working for and with this group of psychologists, who are smart, kind, and compassionate was a pretty good gig!

Recently a member asked me what advice I'd give the next ED. I thought for a minute and said, "I'll tell her that psychologists are upbeat, positive people who treat others with respect and know how to put egos aside to work collaboratively to get things done; and if you just do the same, you will have a wonderful career at the Maine Psychological Association!"

There are many people in this wonderful organization who have provided me with so much support, wise counsel and kindness over the years. To you I offer my sincerest thanks and best wishes for the future of the Maine Psychological Association.

Fondly,

Sheila Comerford

#### Comerford

## **Retirement Reception**





MePA lobbyist, Bob Howe reads from a Legislative Sentiment honoring Comerford presented in the Maine House and Senate on July 19, 2019



MePA President Tom Collins, opens the reception festivities.



Members Diana Prescott, Tom Cooper, John O'Brien, Tony Podraza and David Prescott enjoying the reception.



Sheila and her husband, Steve and daughter Hilary chat with Tom Moyer and Doug Kimmel while Jerry Sapan looks on.

## **Member Publications**

Congratulations to Policy Council member and Chair of the University of Southern Maine School Psychology Dept. Jamie Pratt, PhD, co-author of Conducting School Based Functional Assessments Third Edition A Practitioner's Guide.

https://www.behaviordevelopmentsolutions.com/conducting-school-based-functional-behavioral-assessments-3rd-edition.

MePA Student Member Clelia Sigaud assisted with the publication.

## 129th Legislature Adjourns: A Busy Session for MePA By: Bob Howe, Howe, Cahill and Co.

The First Regular Session of the 129<sup>th</sup> Maine Legislature convened in early January this year and adjourned on the morning of June 20<sup>th</sup> after a marathon, 24-hour session. There was plenty for MePA to keep track of among more than 1,800 pieces of legislation that were printed and heard. We got involved with a number of bills, including the following. MePA supported all of these bills, except where specifically noted.

The session saw a number of bills that would have changed insurance practices regarding behavioral health services, some of which were enacted and several of which were defeated. Among them were these:

LD 52: An Act To Provide an Affordable and Accessible Health Care System for all Residents of Maine - LD 407: An Act To Promote Universal Health Care, Including Dental, Vision and Hearing Care - These two bills were among several that called for some form of universal health care. Neither made it into law, but a more modest proposal (LD 1) to codify into Maine law some of the protections in the federal Affordable Care Act, including coverage for pre-existing conditions, restrictions on dollar caps on benefits, and allowing children up to age 26 to remain on their parents' policies, was enacted. In addition, LD 51: An Act To Implement the Recommendations of the Task Force on Health Care Coverage for All of Maine was carried over to the 2020 legislative session. The recommendations can be viewed online at: http://legislature.maine.gov/doc/2509

LD 593: Resolve, To Stabilize the Behavioral Health Workforce and Avert More Expensive Treatments - This bill would increase MaineCare (Medicaid) rates for behavioral health services by 8%. Specifically, it specifies that the increase in reimbursement rates must be applied to wages and benefits for employees who provide direct care services and not to administrators or managers and that to qualify for the rate increase an agency providing services must demonstrate, to the satisfaction of the Department of Health and Human Services, that an increase in wages and benefits has been granted to employees providing direct care services that equals the amount of the projected increase in reimbursement to be received. The bill was carried over to the 2020 legislative session. **LD 249:** An Act To Ensure Protection of Patients in Medical Reviews by Health Insurance Carriers -This bill requires that appeals by a health insurance customer of a health insurance carrier's adverse health care treatment decision be conducted by a licensed health care practitioner who is board certified in the same or similar specialty as typically manages the medical condition, procedure or treatment under review and whose compensation does not directly or indirectly depend upon the quantity, type or cost of the medical condition, procedure or treatment the practitioner approves or denies on behalf of a carrier. This means that peer reviews of the work of a clinical psychologist will be conducted by a clinical psychologist rather than a person with a different professional license, e.g. a social worker. However, it is not entirely clear how the term "board certified" will be interpreted as it applies to practitioners other than physicians since that term typically refers to the medical profession. The bill was signed into law by Gov. Janet Mills.

#### LD 705: An Act Regarding the Process for Obtaining Prior Authorization for Health Insurance Purposes - This bill does several things, chief among them the following:

- 1. It reduces the time frame for a carrier's response to a prior authorization request from 2 business days to 72 hours or 2 business days, whichever is less, and clarifies that the same time frame for a response applies in instances when a carrier requests additional information or requires outside consultation. It also provides that a request for prior authorization is granted if a carrier fails to respond within the required time frames.
- 2. It prohibits a carrier from requiring prior authorization for medication-assisted treatment for opioid use disorder for the prescription of at least one drug for each type of medication used in medication-assisted treatment, except that a carrier may not require prior authorization for medication-assisted treatment for opioid use disorder for a pregnant woman, and
- 3. It requires a health insurance carrier to develop an electronic transmission system for prior authorization of prescription drug orders by January 1, 2020.

It was also signed into law by Gov. Mills.

LD 600: An Act To Achieve Mental Health Parity in Workers' Compensation - This bill would have changed the standard of proof required to demonstrate entitlement to compensation for a mental injury caused by stress so that it is the same standard as is required with respect to physical injuries. In addition, this bill specifies that a work-related injury that aggravates a preexisting mental condition may result in a compensable disability, just as aggravating a preexisting physical condition may. However, the bill was not enacted.

MePA was active with regard to a number of other issues, ranging from gun violence, conversation therapy and suicide prevention. Here is a sample of those issues.

LD 1811: An Act To Enhance Personal and Public Safety by Requiring Evaluations of and Judicial Hearings for Persons in Protective Custody Regarding Risk of Harm and Restricting Access to Dangerous Weapons - This bill was the only gun-safety piece of legislation to be enacted this year. It puts in place a process by which law enforcement can take a person deemed "to present a likelihood of foreseeable harm to the person or to others" into protective custody in order to be evaluated by a "medical practitioner," including a clinical psychologist. It is based on the existing law allowing for involuntary commitment to a hospital, but enables the examining "medical practitioner" to authorize law enforcement to seek a judicial order to remove firearms from the person's custody or control as an alternative to involuntary commitment.

**LD 379: An Act To Protect Children by Requiring the Safe Storage of Loaded Firearms** - This bill was among more than a dozen bills introduced to get at the problem of gun violence. LD 379 would have made it Class E crime to store or leave on premises under the person's control a loaded firearm, if the person knew or reasonably should have known that a child could likely to gain

access to the loaded firearm, and a child in fact gained access to the loaded firearm and used it in a reckless or threatening manner, or used it to commit a crime or recklessly or negligently discharged the loaded firearm. The bill was defeated in part due to concern about charging the parents of a child following a family tragedy.

Other bills would change have various impacts on the practice of psychology, including these:

LD 287: An Act To Impose on Mental Health Professionals a Duty To Warn and Protect - This bill imposes on certain mental health professionals, including pyschologists, a duty to warn and protect if a patient or client is likely to engage in physical violence that poses a serious risk of harm to self or others. In its original form, the bill would established that the professional was immune from liability whether they chose to warn or not to warn. Instead, the amended bill establishes that there is no monetary liability and that the professionals are not subject to a cause of action based on the disclosure of information to a 3rd party in an effort to discharge the duty to warn or protect. MePA supported the bill although preferred the original bill that would have provided total immunity. The bill was signed into law by Gov. Mills.

#### LD 429: An Act To Improve the Ability of Mental Health Professionals To Assess the Risk of Suicide

- This bill would have added a new requirement for the renewal of professional licenses for psychologists, social workers and licensed clinical professional counselors that each must show proof upon renewal that the licensee had completed a minimum of 6 hours of course work every 10 years in suicide prevention, evidence-based suicide risk assessment or the treatment and management of suicidal persons, including knowledge of community resources and cultural factors. This is one bill that MePA opposed because it made no exceptions for licensees who are not in clinical practice and because we generally oppose the legislature, rather than the licensing board, establishing educational requirements or scope of practice provisions. The bill was defeated.

LD 532: Resolve, Directing Professional Licensing and Certification Boards To Study the Barriers To Obtaining Professional Licensure and Certification - This will would have required each professional licensing and certification board to undertake a review of its rules and procedures and to survey its licensees and certificate holders and applicants for licensure or certification to research barriers to obtaining licensure and certification, including existing deficiencies in reciprocity provisions. The impetus for the bill was to look at ways that recent immigrants with professional degrees could become licensed in Maine in the occupations in which they had been trained in their native countries. The bill was defeated, but the Department of Professional and Financial Regulation said it would assist licensing boards in conducting an examination of these issues without the need for legislation.

LD 1025: An Act To Prohibit the Provision of Conversion Therapy to Minors by Certain Licensed Professionals - This bill prohibits certain professionals, including psychologists, from engaging in "conversion therapy" defined as as "any practice or course of treatment that seeks or purports to change an individual's sexual orientation or gender identity, except for any practice or treatment that assists an individual undergoing a gender transition; any practice or treatment that provides acceptance, support and understanding to an individual; and any practice or treatment that facilitates an individual's coping, social support or identity exploration and development, including any therapeutic intervention that is neutral with regard to sexual orientation or gender identity, and that seeks to prevent or address unlawful conduct or unsafe sexual practices, as long as the counseling does not seek to change the individual's sexual orientation or gender identity." MePA supported the bill, and preferred it over a similar bill that failed in the previous legislature. Unlike the previous effort, LD 1025 does not contain a provision enabling lawsuits against professionals under the Unfair Trade Practices Act. The bill was signed into law by Gov. Mills. **LD 429: An Act To Fund Opioid Use Disorder Prevention and Treatment** - This bill establishes the Opioid Use Disorder Prevention and Treatment Fund administered by the Department of Health and Human Services for the purpose of supporting opioid use disorder analysis, prevention and treatment. The fund is funded by a 2¢ fee per morphine milligram equivalent assessed against prescription opioid drug manufacturers for prescription opioid drugs distributed in the State as well as appropriations, allocations and contributions from private and public sources. The bill was carried over to the 2020 legislative session.

Finally, two pieces of legislation we followed dealt with children's mental health.

**LD 40: Resolve, To Establish the Commission To Study Children's Mental Health** - This bill established the Commission To Study Children's Mental Health to study the mental health of children in the State and federal and state laws, regulations, rules and policies governing the diagnosis and treatment of children with mental health issues. MePA has submitted the name of Dr. Jim Jacobs for the position of one of three providers of mental health services to be appointed by the legislature's presiding officers to sere on the commission which is scheduled to report back their findings to the legislature in December.

## Bangor Area Women in Psychology Meet



Left to Right: Jeanine Crockett, Joan Mansigian, Diane Tennies, Jeanne Dorland, Cheryl Pelletier, Diana Prescott, Lenore Tipping, Debora Elliott Ward, Selena King Caruso , Caitlin Dombrowski



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