



Industrial-organizational psychologist, Dr. Mky Bonner, (L) and husband Sgt. Mark Johnson, Public Information Officer and Crimestoppers with the Monroe Police Department, talk with Dr. John Simoneaux (R) at the recent meeting of the Louisiana Coalition for Violence Prevention. Ms. Michelle Faust, LCSW, and regional administrator for DCFS listens to the discussion. Bonner and Johnson are Co-Coordnators for the Northeast Delta Crisis Intervention Team.

Community Leaders Talk About Violence Prevention June 28

Louisiana often ranked most violent state

The Louisiana Coalition for Violence Prevention hosted a meeting and training session for key community members on Friday, June 28 in Baton Rouge. The event was held at the Baton Rouge Area Foundation on North 4th Street.

Approximately 40 attendees from around the state represented psychology, counseling, social work, school psychology, psychiatry, law enforcement, legal, ministry, and research scientists. The participants listened to a presentation about violence, titled “Preventing Violence in Louisiana: Information, Ideas, and Inspiration,” and participated in a group discussion about the issues for the state.

“Violence is a mental health problem,” said Dr. John Simoneaux, the main presenter at the meeting and Coalition steering committee member. “Have we fixed the mental health problem?” he asked the group. “No,” he said. “The mistake we’ve made is that we haven’t delivered what we know –our knowledge and skills– to the public. We are the ones closest to the problem.”

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Task Force To Survey School Psychologists

The first meeting of the School Specialist Task Force was held June 28 at the state psychology board in Baton Rouge.

The group began work on a survey that will guide them in certain areas. Task force chair, Dr. Rita Culross told the *Times*, “The purpose of the survey is to seek input from school psychologists certified through the State

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Legislature Wraps Up the 2013 Session

The legislative session ended June 6 with last minute work on the state budget, HB 1. In what sources say was a compromise between House Democrats and House Fiscal Conservatives, and then between the House and Senate, the legislature passed the \$25 billion budget.

Governor Jindal then used his line-item veto stripping \$46 million from next year’s budget, mostly from higher education and health services, said a June 25 report for *Times Picayune* (NOLA.com).

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Hoarders’ Dr. Chabaud Hosts Summit in N.O.

Dr. Suzanne Chabaud, Louisiana licensed clinical and developmental psychologist, hosted individuals from around the country for the second Adult Children of Hoarders Summit held June 19 to 24 in New Orleans. Chabaud is Director of the Obsessive Compulsive Disorders Institute of Greater New Orleans and expert in 33 episodes of the award-winning A&E television show, *Hoarders*.

Through her work on *Hoarders*, Dr. Chabaud became attuned to the challenges of children raised in hoarded

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Dr. Carmen Broussard (L) and Dr. Conni Patterson discuss ideas at the recent meeting of the LSBEP task force to study the possible regulation of specialists in school psychology. Broussard is an associate professor at Nicholls and Patterson is a professor at Tulane.

Editorial Page

Harbingers

I've been covering the news in our community for about four years now, and it has taken me a long time to even begin to know all the different people and groups that make us who we are. We're a complex, interesting social system.

I believe that two recent events suggest an important shift in our culture, a culture that Senator J.P. Morrell described as "warring fiefdoms." It was also rumored that he said dealing with us was like herding cats. How awful, to be characterized this way by Senator Morrell.

That is why two events seem like a fresh wind blowing.

Last week, the task force on school psychology specialists met for the first time. This group will be addressing something that has deeply separated the clinical psychologists from the school psychologists. I don't know or understand all the background but I was moved when Dr. Steven Welsh stated at a planning meeting of the psychology board that it was the first time in 30 years that someone had been invited to talk about the issue.

The other event was the meeting of the Louisiana Coalition for Violence Prevention. The meeting brought together many different people from different disciplines. The group process was a delightful mix of ideas, criticisms, support, topic shifts, and humor. Underneath it was a core of respect and goodwill. John Simoneaux, a founder of the Coalition, set the tone with his sincerity, inclusiveness and vision.

While the process was a bit ragged, it was the tone that was fundamentally different from most of the other groups I've covered over the last years.

Of course, it is much easier to interact effectively when goals are already in alignment, and much harder when dealing with turf conflicts. But trust starts in open communication and mutual respect, and trust is required for solving conflicts when the going gets tough.

Both events are a long way from being sent to the play therapy room by Senators who know a lot less about human behavior than we do.

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We welcome ideas for news, features, Letters to the Editor, photos, and other material related to psychological community of Louisiana.

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Letters to the Editor

Editor's Note: In last month's issue (June, Vol 4, No 10) the Times published a Letter to the Editor from Joseph Comaty, PhD, MP. He gave some views regarding the Louisiana Psychological Association's (LPA) handling of the Behavior Analyst bill. The Times recently received a Letter to the Editor from members of the Executive Council of LPA, signed by Bryan Gros, PhD and Alicia Pellegrin, PhD, responding to views expressed in Dr. Comaty's June Letter to the Editor.

Governor Bobby Jindal sent a Letter to the Editor to all Louisiana newspapers regarding cuts to services for those with Developmental Disabilities.

Both letters follow.

LPA Responds to Dr. Comaty

Letter To The Editor From LPA Executive Council

A Letter To The Editor in the previous issue of *The Psychology Times* criticized LPA's handling of negotiations regarding SB 134, which, if signed by the governor, will create a practice act and separate board for BA (behavior analyst) practitioners. The author of that letter was not involved in the many discussions within LPA and its members, the LPA Executive Council, LPA's discussions with the LSBEP, or with the communications between LPA and Senator Morrell, the author of SB 134. These discussions were quite extensive and rapidly changing. As the letter contained some inaccuracies, LPA would like to correct these in order to "set the record straight."

Firstly, we would encourage colleagues who are not LPA members, including the author of that letter, to join LPA and increase the representation of all of psychology and to "have a voice" with LPA.

In 2012, the psychology board (LSBEP) presented LPA with a draft bill to place the regulation of behavior analysts as an advisory committee under LSBEP. We offered initial support. This draft was presented to the BAs and Senator Morrell, but was soundly rejected and the message was clear that the BAs and Senator Morrell would not support such an arrangement.

Subsequently, a BA study commission was formed to determine recommendations regarding BA regulation. This group included a representative from LPA who is a psychologist and a Board Certified Behavior Analyst (BCBA). The author of the letter to *The Psychology Times* was not a member of, or directly involved in this group. Politics were involved. LSBEP also had representatives on this commission and contrary to the letter to the editor, LPA was in frequent communication with LSBEP prior to and during deliberations and following the commission's recommendation(s).

It was clear during discussions that a final vote would not support BAs being regulated by LSBEP as an advisory committee. It was less clear if participants were willing to vote in favor of a merged board with psychology. With limited voting options and unknowns, LPA voted for a merged board for BAs with LSBEP. The final outcome was an overwhelming recommendation for the BAs to merge with the LPC board.

However, the BAs and the LPC board were unable to come to a mutually agreeable arrangement and this plan was abandoned. LPA was then informed that LSBEP had offered its own merger to the BAs with two full seats for BAs on the psychology board, as opposed to being an advisory

Letters to the Editor

Continued

LPA Responds to Dr. Comaty

Continued

committee. In the draft legislation, there were no provisions addressing voting restrictions for BAs, which was of serious concern to the LPA EC. LPA consulted with LSBEP, our lobbyist, and others. We communicated frequently with LSBEP. LPA made LSBEP aware of our concerns about BAs possibly being able to vote on psychology issues. LSBEP acknowledged these were valid concerns and stated that they hoped to restrict voting privileges through rule making. However, there was no guarantee that BAs, as full board members, would be completely prohibited from voting on psychology issues.

In addition to communications with LSBEP, there were on-going discussions among LPA EC members, our lobbyist, and much feedback from LPA members. The EC eventually decided that the potential risks outweighed the potential benefits and stated that LPA would not support a merger where our board would be diluted with non-psychologists and where BAs had two seats on LSBEP with no restrictions on voting by statute.

We also want to clear up concerns that may have been raised about dual licensure. This is a non-issue. "Behavior analysis" remains in the psychology practice act. Additionally, LPA successfully (and without objection) obtained an exemption in SB 134 for psychologists to continue to practice "behavior analysis", and to state that they do in those terms. This is stated explicitly in SB 134: *"An individual licensed to practice psychology within the state, so long as the applied behavior analysis services provided by the licensed psychologist are within the licensed psychologist's education, training and expertise. This includes individuals acting under the extended authority and direction of licensed psychologists."* Dual licensure is not required for psychologists to practice "behavior analysis" or say that they practice as such; the BA board will have no regulatory authority over a psychologist's practice of behavior analysis in such circumstances. Furthermore, a BA license is not required to be a Board Certified Behavior Analyst; nothing will change in the

regulation of the practice of psychologists who have that certification. Of course, psychologists "can" obtain dual licensure, just as they can with other professions in the field of behavioral health (i.e., a licensed psychologist can also be a licensed LPC; a medical psychologist licensed by the medical board can also choose to be licensed by LSBEP), but this is not a requirement.

LPA does not believe we have *"given away part of psychology"* as the previous author asserted. The political reality is that the BAs were going to obtain licensure and be regulated. Senator Morrell was adamant on that point and legislative leaders made it very clear to our lobbyist that with Senator Morrell's backing, the bill would pass. It was made known to LPA that all other parties, including LSBEP, were supportive of the eventual independent practice and regulation of BAs. It was made clear that the BAs would not be under the supervision of the LSBEP unless they had two **full** members on the board. This was a political fact and the only option was to work for the best outcome attainable.

Contrary to the previous letter, we were not "pleased". In fact, LPA did not like the political process and wished that matters were different, but this was the reality with which we were faced.

We want to be clear on another issue that was raised, funding for the BAs. In a face-to-face meeting during an LPA Executive Council meeting representatives from LSBEP indicated that BAs would be responsible for all costs, including start-up monies.

LPA represents its members and psychology in Louisiana. We hope that all current LPA members will continue their membership and, again, encourage non-member colleagues to join us to increase the representation of all of psychology within our organization.

On behalf of the LPA Executive Council,

Alicia Pellegrin, Ph.D.
Legislative Chair

Bryan J. Gros, Ph.D.
President



A previous meeting of the Executive Council of the Louisiana Psychological Association. The Council recently responded with a Letter to the Editor regarding its actions during the legislative session. Front to back: Drs. Paula Zeanah, Kim Van Geffen, Alicia Pellegrin, and Carolyn Weyand.

Governor Jindal On Cuts to People With Developmental Disabilities

Letter To The Editor From Governor Jindal

Office of the Governor
June 25, 2013

Last week I signed HB 1, Louisiana's budget bill for the next fiscal year. Despite reports to the contrary, the final budget that was signed into law does not include any cuts for people with developmental disabilities who are currently receiving waiver services.

The truth is, more people than ever before in Louisiana are now being served by programs for people with developmental disabilities (more than 20,000), and we're providing more funding for New Opportunity Waiver (NOW) slots than at any time in our state's history by committing \$417 million in funding for the current Fiscal Year, a \$91.3 million increase since I took office.

Overall since 2008, we have added more than 2,800 waiver slots for people with developmental disabilities. We have also made a substantial commitment to increasing funding for helping people with developmental disabilities.

According to the University of Colorado "State of the States in Developmental Disabilities Project," Louisiana is currently among the top ten states in terms of total



Governor Jindal

spending for people with developmental disabilities.

Between fiscal year 2008 and the budget for fiscal year 2013, we have increased state funding support for our four waivers for people with developmental disabilities by 92.9 percent. In dollars, that represents a \$71.5 million increase in State General Fund dollars, moving from \$77 million in funding to \$148.5 million.

During the same time period, we've implemented a 109.7 percent increase in state funding support for all Home and Community Based Services (HCBS) waivers. In dollars, that represents a \$98.6 million increase in State General Fund monies.

We have worked hard over the last five and a half years to make

Legislature Wraps

Continued

The budget includes a pay increase for teachers, money for Southern University, and some efforts to reduce the use of one-time money. Governor Jindal’s vetos of funds for some Developmental Disabilities programs prompted a Letter to the Editor from the Governor to state newspapers (see this issue).

Department of Health and Hospitals and higher education took the major cuts, although the Governor noted in his announcement on June 21 that the \$11 million cut to the Board of Regents is expected to be offset by increases in fees.

In the NOLA.com article, Health and Hospitals Secretary Kathy Kliebert said she worked to protect critical services when adjusting to the \$26 million in cuts from state funds, which then

doubled to \$52 million with the loss of federal Medicaid matching funds.

Highlights of the session include:

- Legislation to create a new board for behavior analysts was signed by Governor Jindal June 17, becoming Act 351. The law goes into effect August 1, 2013.

- A bill establishing Mental Health Courts passed and was signed. It becomes Act 346, effective August 1. The law defines these mental health court treatment programs, including mental health court program, mental health court professional, post–adjudicatory mental health court programs, and co-occurring mental illness and substance abuse issues.



Photo: M. Dooley

The bill to establish an independent board for behavior analysts, HB 134, was signed by Governor Jindal in June and became Act 351. The law takes effect August 1 and board appointments are in the process of being made. Above: Members of the study commission that helped designed much of the bill, listens to debate and discussion. (L to R) John McBride, LCSW, representing the Louisiana State Board of Social Work Examiners; Cassie Bradford, BCBA; Janice Huber, BCBA; Dr. Denise Arellano, representing the Psychology Department at McNeese State University; and Dr. Dolleen Day-Keohane, BCBA-D.

- The bill to criminalize sex with psychotherapy clients stalled in committee.

- A bill creating the “Fatherhood First” initiative passed, signed, and is effective in August. The secretary of the Dept. of Children and Family Services (DCFS) to convene and chair a “Fatherhood First Council.” Including in the council is the secretary or representative from: the Louisiana Workforce Commission, the Department of Education, Louisiana District Attorney’s Association. Two representatives from the Children’s Cabinet Advisory Board, one or more representatives of the clergy, and a member with expertise in male psychology and health are to be included.

- HB 281 was signed, becoming Act 308. Now, anyone providing mental health services who is not licensed under a state board will be required to be licensed under the Department of Health and Hospitals. Signed on June 17, the bill became effective when signed.

- The LPC board made changes in fee ranges and other aspects of the counselor law with SB 86, signed on June 7, becoming Act 173. New fee ranges and other

items will go into effect January 1, 2014.

- The Louisiana Coalition for Violence Prevention was commended for it efforts to unite the behavioral health community in a violence reduction effort, in a Senate Concurrent Resolution.

- Two Anti-Human Trafficking bills were signed into law. HB 126 strengthens enforcement of current law that requires certain establishments to post the National Human Trafficking Hotline number. SB 88 helps sexually exploited children who may have been human trafficked by allowing for pre-adjudication diversion programs for juveniles alleged to have engaged in prostitution related offenses. This bill also creates a civil cause of action for victims, making victim restitution mandatory and establishing victim assistance guidelines for law enforcement, District Attorneys and the Attorney General’s office.

- SB 135 was passed having to do with increased reporting of mental health treatment. It requires increased reporting standards to the National Instant Criminal Background Check System (NICS) database, including individuals who

are ineligible to purchase firearms based on their involuntary commitment to an inpatient mental facility, found not guilty by reason of insanity, found not competent to stand trial or who are convicted of a violent crime. This legislation also establishes a way for individuals whose mental illness diagnosis has been reversed to regain their right to possess a firearm through a petition to the court.

- HB 442, now Act 389, increases access to drug treatment for drug offenders. The bill removes some of the barriers to the judicial Drug Court probation program and administratively expands the use of mandatory

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Letters to the Editor

Continued

Governor Jindal On Cuts

Continued

things better for those who need care by implementing measures to help individuals who are ready to transition from institutional settings to more independent lives in their communities.

Caring for people with developmental disabilities is important, and it is a responsibility we take seriously—as evidenced by the fact that more of our most vulnerable are receiving care in our most comprehensive program with more funding than ever before.

We have expanded this program in the past and will continue to expand it in the future as the budget allows. This year’s budget, however, requires us to cut \$40

million, which made a \$4 million expansion difficult.

Instead, we protected the most critical programs that our citizens with developmental disabilities use every day and focused on programs that haven’t yet been implemented, ensuring we maintain the services that people rely on.

Our efforts will allow us to ensure that future investments in these programs are made in the most sustainable manner possible, for the benefit of both the people we serve and the taxpayers who entrust us with their dollars.

Gov. Bobby Jindal

Corrections & Clarifications

In the June issue we accidentally referred to Rich Maples as Dr. Rich Maples. Also, we indicated that Dr. Yael Banai’s degree was in clinical, when it is in educational. Both errors were corrected in the evening editions. We apologize for any confusion we may have caused.

State and National News

Community Leaders
Talk About Violence
Continued

“The person who goes out and kills someone, or kills five people—someone close to that person knew,” he said. Simoneaux is owner of Professional Training Resources, based in Pineville, LA.

He told the group that only 17 percent of the people in the state needing mental health services receive the necessary services.

“You are here because you, or your organization, are considered to be among the leaders in Louisiana of behavior science experts,” he said to attendees.

Dr. Bryan Gros, who introduced the steering committee members, said that this was a major step in bringing the behavioral health community together to deal with the issues of violence. “I’m privileged to be a part of this effort,” he said. Gros is past president of the Louisiana Psychological Association.

Cindy Nardini, licensed professional counselor and legislative chair for the Louisiana Counseling Association, explained that the Coalition’s efforts have been supported by the legislature in the form of a Senate Concurrent Resolution authored by Senator Mills. “We did not want a hard legislative measure, but only a soft show of support. We did not want to push people to do something they do not want to do.” She said the Coalition wanted to engage people voluntarily.

During the day, Simoneaux presented facts about violence in Louisiana. He noted that a May 7, 2012 issue of U.S.A. News identified Louisiana as the “Most Violent State in the U.S.” This was based on homicide rates, violent crime rates, and incarceration rates, as well as availability of firearms.

He reported that homicide was the second leading cause of death in Louisiana between 2008 and 2010, for persons between the



About 40 attendees from around the state met, representing counseling, social work, psychology school psychology, research scientists and others. The participants listened to a presentation about violence, titled “Preventing Violence in Louisiana: Information, Ideas, and Inspiration,” and participated in a group discussion about the issues for the state. Above, Cindy Nardini, LPC, talks about the Coalition and a Senate Concurrent Resolution supporting the group.

ages of 10-24. And also that suicide is the third leading cause of death in the state for this age group.

The murder rate in New Orleans is 20% higher than Detroit, and nine times higher than New York and San Francisco, Simoneaux explained. And, Louisiana ranked 1st for gun violence and 2nd for murders of police officers.

Louisiana has 13,000 received domestic violence services, more than 3,500 orders for protection issued, and 1,562 forcible rapes reported, he said. In 2010 Louisiana ranked first in the nation with a homicide rate of 2.53 per 100,000 for females murdered by males, more than double the national average.

“We have a mental health problem,” he said. “ And a child-rearing problem, a family problem, a

problem with our kin, and it is our responsibility to use our science, our skills, and our knowledge to deliver the answers and the help that we have to offer,” he noted.

The Coalition members proposed a plan to increase skill levels for behavioral health service providers that increases the effective and early detection of potentially violent individuals.

Simoneaux and others pointed out that the approach would not cost anything and would not involve government. “We do not want government to try and solve this for us, we want to provide solutions before faulty solutions are imposed by others,” he noted.

“The concern we have had is if the legislature tries to fix things, then we’ll have to wade through all sorts of additional problems,” he said. “The legislature is removed from the problem, this distance results in inefficient solutions.”

John Strain, licensed professional counselor from Mandeville, said, “This approach doesn’t increase the resources for the problem, it makes the resources we have more effective.”

Psychological scientist Dr. Alex Cohen from Louisiana State University (LSU) pointed out that eliminating violence was an ambitious goal. Dr. Julie Buckner also from LSU described some limitations with training approaches where even those who are adequately trained do not always apply their training.

The Coalition steering members agreed to take the ideas from the participants and blend them into the next plans.

One of the steering group members, Dr. Yael Banai, past president of the Louisiana School Psychological Association, noted the positive interactions in the multi-disciplinary meeting. She said, “To me perhaps the most important feature is that this initial in-service represents the work of a broad based coalition of mental health professionals who have plied their efforts across the artificial professional-organizational lines that often divide us, in service of the greater good.”

Legislature Wraps Things Up June 6
Continued

substance abuse treatment for eligible non-violent, non-sex drug offenders by authorizing the Department of Corrections (DOC) to create a substance abuse probation program. The legislation also incentivizes treatment for some who are presently in prison, by offering early release and intensive parole supervision to first and second, non-violent, non-sex offenders who have served two years, are within one year of release and have successfully completed a 90-day drug treatment program.

SB 107 (Act 214) supports treatment of youth who are involved in both the child welfare and juvenile justice systems (“crossover youth”) through a case management system that builds on the Coordinated System of Care (CSOC) created in 2011 for youth with severe mental illness.

SB 32 (Act 29) was signed on May 29. The legislation helps veterans access veteran-specific mental health or substance abuse services by granting judges, when sentencing veteran defendants, the authority to require that the Department of Corrections partner with the Department of Veterans Affairs to identify existing support programs. This will help ensure the opportunity exists to offer mental health and/or substance abuse treatment specifically tailored for veteran offenders if treatment is appropriate.

• SB 204 (Act 360) provides \$251.6 million in financing and construction for 29 projects at Louisiana Community and Technical College campuses. Included in the 29 projects are 25 workforce projects, three student testing, career and service centers, and one safety related project.

• House Bill 720 was signed and goes forward as an arrangement allowing Children’s Hospital to purchase the New Orleans Adolescent Hospital. Children’s will agree to add and additional 16 pediatric or adolescent behavior health care beds. The legislation also mandated the expansion of the Autism Center on the Children’s campus and increasing services for inpatient-to-outpatient behavioral transition care.

State and National News

School Psychology

Continued

Department of Education and psychologists licensed through LSBEP [Louisiana State Board of Examiners of Psychologists] on the possible regulation of school specialists through LSBEP.”

The agenda for the Friday meeting also included a review of the purpose of the task force and a review of definitions and language from other states that license school psychology specialists. The group discussed guidelines and a schedule for future meetings, and also reviewed Open Meeting Law, according to the agenda.

At a recent presentation by the psychology board, previous board Chair Lee Matthews noted that the task force was created to study the possible licensure of school specialists in Louisiana. The specialist degree in school psychology is offered by LSU–Shreveport and by Nicholls State University, and requires 72 hours of graduate training and 1200 hours supervised practice.

Members of the task force are Dr. Rita Culross, Professor at LSU, representing the LSBEP; Dr. Conni Patterson, Professor of Practice at Tulane University and past president of the Louisiana School Psychology Association; Dr. Steven Welsh, retired Department head for the Department of Psychology and Counselor Education at Nicholls, and the interim Dean of the College of Education; Dr. Carmen Broussard, Associate Professor of Psychology at Nicholls; Susan Ratterree, Delegate to the National Association of School Psychologists for the Louisiana School Psychological Association; and, E. Francoise Parr, President of the Louisiana School Psychological Association.

Behavior Analyst Board Begins August 1, 2013

Senate Bill 134 to establish an independent board for behavior analysts was signed by the governor on June 17 making it Act 351. The law goes into affect August 1, and the first official board meeting is set for Tuesday, August 6, 2013.

The law directs the Behavior Analyst Board to share resources with the Psychology Board, including office space, professional staff, including technical and professional assistance from the psychology board’s Executive Director, Kelly Parker.

Parker explained to the *Times* that she will fulfill the role as the Executive Director of the BA board along with her duties for the psychology board, and has been assisting the behavior analysts from LaBAA (Louisiana Behavior Analysis Association) with the early development of the board’s activities and with several organizational meetings.

The Governor’s Office has the list of names to appoint the BA board members, Parker explained to the *Times*. “The Governor will select five members from the list, and all will sit on the Board but will still need Senate confirmation next year,” she said. “My goal has been advanced preparation, and the preliminary meetings have helped us get a good start on a busy first year. There is a lot of work that needs to be done,” she said.

“Four of the members out of the six nominees have been contacted,” Parker explained.

“I called a meeting of all the nominees to go over the preliminary information that we had been working on with the Executive Council of LaBAA, including the finances and Memorandum of Understanding. I am confident that the group will work hard to accomplish the tasks ahead.”

SB134 also provided for one individual from the psychology board to be a member of the BA board. “I believe that the psychology board is going to appoint a designee on an annual basis,” said Parker. “That person may be appointed this Friday [July 5].”

Regarding finances and concerns that the psychology board and those who support the board



Dr. Phil Griffin was appointed to the state psychology board for a five-year term, announced Friday by the Governor’s Office. Also appointed was Dr. Jessica Brown, to fill a one-year term.

Governor Appoints Brown, Griffin To Psychology Board

In a press release Friday Governor Jindal announced that he was appointing Dr. Jessica Brown and Dr. Phillip Griffin to the state psychology board.

Brown will fill an unexpired term caused by Dr. John Courtney’s resignation in December 2012. The term will end in 2014.

Brown’s name was submitted to the Governor along with top vote-getter, Dr. Beverly Stubblefield. In an election earlier this year, Stubblefield received 59 votes and Brown 54.

Brown has worked for the Department of Health and Hospitals in Behavioral Health, and recently transitioned to the Neuromedical Center, in Baton Rouge, as a staff psychologist, joining medical psychologists Drs. John Bolter and Paul Dammers.

The Governor also appointed Dr. Phillip Griffin who will fill a five-year term to replace outgoing board member and chair, Dr. Lee Matthews. The Governor chose Griffin, who had received 81 votes in a election this year, passing over Dr. Joseph Comaty who received 46 votes.

Griffin is a professor of clinical psychiatry and psychology, and section chief at LSU Health Sciences Center in New Orleans. He is also two time past president of the Louisiana Psychological Association.

Along with the top two names submitted to fill a position on the board, the president of the Louisiana Psychological Association also writes asking the governor to appoint the top vote getter, Dr. Bryan Gros explained.

In a copy of the letter obtained by the *Times*, Gros, then president, wrote, “We in the psychology community support your goals of transparency and accountability. We need your help in creating a more democratic and transparent theme for us as well. In this respect, we ask that you appoint the person with the top number of votes,”

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E. Francoise Parr and Dr. Steven Welsh listening to discussion at the first task force meeting of the school specialist task force. Parr is president of the Louisiana School Psychological Association and Dr. Welsh has served as dean and professor at Nicholls State University.

Hoarders’ Dr. Chaubaud Hosts Summit in N.O., Continued

homes. The first Summit in 2011 generated a leadership group of adults whose mission is to increase awareness of the long-term challenges of children of hoarders, including the stress of aging parents who still hoard. Many members of this group flew in from all parts of the country to attend this 2013 Summit, said Chaubaud.

Dr. Chaubaud explained recently to the *Times*, “These very smart, successful and committed attendees will be among the movers and shakers for the future projects. They have already done a lot.”

One of the guest speakers at the Summit was Virginia Barkley, author of *Clutter Busting for Busy Women*. Chaubaud explained to the *Times* that an unexpected result of this meeting was the exciting possibilities for future collaboration between professional organizers, such as Ms. Barkley, and adult children of hoarders.

The Summit focused on planning a large-scale, national conference with a possible date in 2014. Along

with this goal, attendees outlined the values and missions of a future non-profit group aimed to accomplish many goals in the future road ahead, explained Chaubaud.

During the past two years Chaubaud has presented at a number of conferences to help increase knowledge and awareness about hoarders and their children. “These conferences brought home the importance of contributions from professions ranging from fire-fighters to psychologists for authoring innovative solutions,” Chaubaud said. “No one profession can tackle these concerns alone.”

Dr. Suzanne Chaubaud will be speaking at the Institute for Chronic Disorganization in September 2013 and spoke at the National Association for Professional Organizers in May 2013. Last year Chaubaud presented her research on adult children of hoarders to members of the Louisiana Psychological Association in a workshop titled, “Out of the Hoard.” She pointed out that the hoarding disorder is made real in the experiences of hundreds of adult-children of hoarders. She laid out her extensive research about how hoarding affects every aspect of family life and children’s development, and that these outcomes continue even after the child has grown to adulthood and escaped the original environment.

In 2011 Chaubaud appeared on ABC’s prime time news magazine, *20/20*, as part of a special report about children of hoarders and the psychological impact that they must manage as adults.

“These children of hoarders, they walk around with this feeling like ‘I didn’t get the basics on how a



Dr. Suzanne Chaubaud (R) helps her client on a previous episode of the award-winning A&E Television show, *Hoarders*. (Photo courtesy of A&E TV)

person is supposed to live their life,” Dr. Chaubaud explained to *20/20* anchor Elizabeth Vargas. “The effects of a childhood that was hoarded are pervasive and long-lasting,” Chaubaud said. “... These children have a burden that lasts a lifetime.”

The A&E series helps viewers understand how this disorder affects. “...virtually every psychological, sensory and perceptual process, and frequently the physical health of people who live in hoarded homes,” Chaubaud previously explained to the *Times*. “It affects the development of children and the entire health of families. It affects neighbors who often fear

the effects of a hoarded home that threaten their property safety and value. It can also require costly interventions by code enforcement, child protection, humane societies, fire fighters, and so on.”

“You just can’t put these children in foster homes. There has to be a program to help them address the damages of life in hoarded homes,” Chaubaud said.

More information can be found at: <http://www.aetv.com/hoarders/meet-experts/suzanne-chaubaud/>



Dr. Suzanne Chaubaud at the recent Summit for Children of Hoarders, held in New Orleans. (Courtesy photo.)

Behavior Analyst Board Continued

with their fees will ultimately be carrying expenses for the BA board, she said, “I believe that the BA board has a small start up fund, which should help them promulgate a couple necessary rules to accept applications and collect fees in the beginning.”

“Hopefully there won’t be any issues with the MOU [Memorandum of Understanding]. We cannot officially execute the document until the BA Board is official, which is after August 1st. LaBAA representatives have had input on the document, and we are hoping everyone is still okay with it,” she said. “The execution of the MOU is a priority.”

“We hope this document will protect both Boards,” Parker noted. “The document is also helpful because it outlines each party’s responsibilities and expectations regarding sharing of resources, finances and the regulation of dually licensed individuals.”

The first official BA board meeting is set for Tuesday, August 6, 2013, to be held at the psychology board’s physical office in Baton Rouge.

New Group Helps Louisianians Understand Healthcare Reform

Press Release

More than 80 healthcare, community, business, trade, and faith-based organizations from across the state have joined together in the Louisiana Healthcare Education Coalition.

Launched in March, the group aims to help Louisianians better understand healthcare reform and the health insurance marketplace. The marketplace will open for enrollment in October of this year.

“As a civic organization committed to providing unbiased healthcare and wellness information, the coalition also aims to educate on the major drivers of healthcare costs, the critical importance of personal wellness and the need for access to quality healthcare,” said Mike Reitz, president and CEO of Blue Cross and Blue Shield of Louisiana.

In an effort to help Louisianians better understand the Patient Protection and Affordable Care Act (PPACA), the Coalition educates the community through guest speaking opportunities, presence at health fairs and other events and through online and social media, such as a blog, e-newsletter and comprehensive website.

Organizations interested in becoming a partner, or to review a complete list of coalition partners, visit www.lhec.net.



Dr. Gary Gintner
(Courtesy photo)

Dr. Gintner Presents At Ohio Psych Assn

Dr. Gary Gintner, Associate Professor and Program Leader of the Counseling Program at Louisiana State University, presented at the Ohio Psychological Association, June 28, in Columbus Ohio.

The workshop, “DSM-5: A User’s Guide Workshop,” was hosted by *The National Psychologist* and the Ohio Psychological Association.

Dr. Gintner is currently the DSM-5 Task Force Chair for the American Mental Health Counselors Association and a nationally recognized trainer on the DSM. As Chair, he has provided responses for the DSM-5 development for the American Psychiatric Association.

Gintner has published on differential diagnosis, mood disorders, substance abuse, and best practices for treatment of psychiatric and substance use disorders.

“The DSM-5 is really a major change,” Gintner explained to the *Times*. “It’s probably in the range of change of DSM-3. There is a major paradigm shift going on.”

“They are trying to include the latest evidence on how disorders present and how they unfold,” he said. “You’ll see a different organization than people are used to. One example is that the anxiety disorders of DSM-IV have been separated into three chapters: anxiety disorders, such as panic, phobias; obsessive-compulsive and related disorders—OCD, hoarding; and trauma and stressor related disorders—PTSD and adjustment disorder.”

“They infused a more developmental perspective,” he said. “The idea is that when clinicians go into the manual they will get a better idea of how disorders present across the lifespan.”

Dr. Gintner has conducted workshops on the DSM since the early 1990s. He has provided training for the American Counseling Association, the American Mental Health Counseling Association, and many state associations, including Marriage and Family Therapy state associations.

The National Psychologist, a national newspaper for the mental health community, contacted Gintner and asked if he could provide a workshop for the Ohio association.

Researchers From Around LA Present Their Work At SEPA

by Suzanne Booth

The 59th annual meeting of the Southeastern Psychological Association (SEPA) was held in Atlanta, GA, this past March, with professors and students representing a number of universities from across the Louisiana.

Elizabeth Hertzler, Donice Banks, Justin Russell, Brandon Scott, and Dr. Carl Weems of the University of New Orleans (UNO) presented their work titled, “Existential anxiety in adolescence: Prevalence and associations with psychological symptoms following disaster.”

Hertzler told the *Times*, “I was pleasantly surprised by the amount of interest and feedback I got from the other attendees. I spent my entire allotted presentation time discussing in depth the extent of our research as well as the theory of Existential Anxiety, and my interests in utilizing sources such as philosophical theory in research.”

“The conference was small enough to allow for the intimacy of one-on-one conversations and inquiries about the research and interests of the other attendees,” she said, “while still maintaining the topic diversity that a large conference may offer.”

UNO’s Weems explained that his future research goals include, “Examining trajectories of post traumatic stress in youth effected by disasters in the LA gulf region and trying to identify factors associated with resilience.”

Louisiana Tech’s Rebecca Cox, Devin Merritt, Stefani Paul, Cheyenne Whitehead, Dr. Walter Buboltz, and Dr. Janelle McDaniel presented “Sleep quality, health, and well-being.” Also, Devin Merritt, Rebecca Cox, Ashley Moore, Dr. Janelle McDaniel, and Dr. Walter Buboltz presented, “College student energy drink consumption and sleep quality.”

Buboltz and his team at Louisiana Tech will continue his long line of research on sleep and sleep quality he explained. “I have been doing sleep research for over 15 years and I have various projects related to sleep and human performance,” Buboltz said.

“The next phase of the research is to examine specific aspects of sleep quality and how they relate or impact health,” he told the *Times*. “My research team is also planning on looking at variables that may moderate or mediate the relationship between sleep quality and physical and emotional health.”

Rebecca Cox of Louisiana Tech partnered with Joe Slimowicz of Nova Southeastern University and John Grohol of the popular website *PsychCentral* for, “Quality of mental health information found online: Pilot study.”

Terri Duck and Alicia Ford of Louisiana Tech presented, “Hope as a mediator between parenting style and distress.”

Loyola’s Dr. Kendall Eskine and Dr. William Locander presented their project, “What’s in a name? Anthropomorphizing products increases their trustworthiness.”

Northwestern State University of Louisiana was represented by Suni Pool and Dr. Margaret Cochran in the Education, Teaching, and School category with their paper, “The effects of coping and classification on psychological well-being: A cross-sectional study.”

Pool presented was her Master’s thesis research. “The impetus behind my research into coping and classification on well-being was based on my experiences as an undergraduate student,” she told the *Times*.

Pool noted that her own coping skills improved from the time she was a freshman to her senior year. “I hoped that I could uncover specific coping strategies that were helpful and also harmful to the well-being of undergraduate students,” she said. “This increased understanding might then be helpful to university faculty and administration in regard to aiding students in remaining adaptive ...” Pool explained.

(Suzanne Booth, MA, is a doctoral IO psychology student at LSU and a Psychology Times Intern.)

Psychology Board Notice of CE Change Postponed to July

Due to an administration problem at the state *Register*, the state psychology board could not publish the rule changes for continuing education in June, explained Executive Director, Kelly Parker. The board expects to publish rule changes in the July issue of the Louisiana Register. The changes will include an expansion of types of training that meet requirements, and an increase of hours from 30 to 40. The public will have a period to give comments after the Notice is published, which should now be about July 20.

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First Place, Best Continuing Coverage of a Single News Event
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VA Clinicians Help Raise PTSD Awareness in June

Staff at the Alexandria Veterans Affairs Medical Center held an open house June 27 to help promote awareness about PTSD, part of a national effort to educate and reduce the stigma of seeking help for this disorder.

“Following trauma, most people experience stress reactions but many do not develop PTSD,” said Dr. Leslie Drew, clinical psychologist and PTSD Program Coordinator at Alexandria Veterans Affairs Health Care System (AVAHCS).

“Mental health experts are not sure why some people develop PTSD and others do not,” she explained. “However, if stress reactions do not improve over time and they disrupt everyday life, help should be sought to determine if PTSD is a factor.”

June is National PTSD Awareness Month, June 20 is National PTSD Screening Day, and June 27 is National PTSD Awareness Day, named by the U.S. Congress in 2010.

“Since then, during the month of June,” Dr. Drew explained, “we ask everyone to help us raise PTSD awareness.”

The Alexandria team hosted an open house on June 27, providing information for veterans, providers, staff and community in its efforts to help educate and raise awareness.

“The open house is just tables of educational materials and with providers available to answer questions,” Drew explained to the *Times*. “It is set up outside the Canteen at the VA to maximize traffic. People typically don’t attend PTSD programs due to stigma – so this is a way around it.”

“The purpose of PTSD Awareness Month is to encourage everyone to raise public awareness of PTSD and its effective treatments so that everyone can help people affected by PTSD,” she noted.

Dr. Drew and colleague Dr. Kelley Pears recently presented a workshop on Prolonged Exposure Therapy at the recent Louisiana Psychological Association Convention in Baton Rouge. Pears is a Post Traumatic Stress Disorder/ Substance Use Disorders psychologist at the Alexandria VA Medical Center in Pineville, Louisiana.

“PTSD is not ‘cured’ because it is an injury,” Drew explained “but it can be successfully treated with the help of evidence-based therapies. Just as we may have arthritis after a traumatic physical injury, like breaking a bone, we learn to manage the residual pain. We also may have residual symptoms and pain associated with PTSD that can also be managed.”

“It is important for the community to understand what is important to veterans,” she said. “They must



The About Face Program is dedicated to changing the lives of Veterans with posttraumatic stress disorder, produced by the National Center for PTSD.

also be cognizant that veterans with PTSD have significant issues with trust. Veterans embody the values of honor, service, justice, fairness, and respect. To connect with veterans, we must be honorable, we must serve, we must be just, we must be fair, and we must be respectful. In short, we must be good people and good citizens. Veterans detest being given lip service – they will judge you by your actions.”

The program at AVAHCS includes some innovative projects, such as the Gathering Program. “The Gathering program is a recovery-oriented, social event for veterans to learn to tolerate their anxiety associated with large groups of people,” explained Drew.

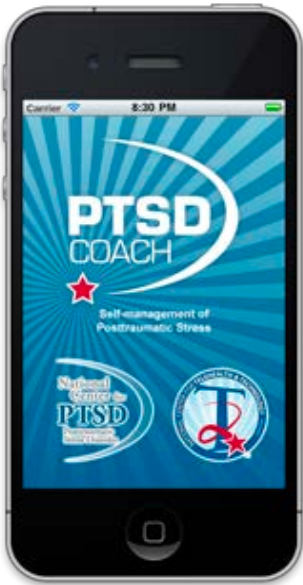
The PTSD Gathering Program was selected by the Office of Mental Health Operations for the Department of Veterans Affairs for their Strong Practices Project which identifies strong practices within VA and posts the information on their website.

Also, the PTSD program is in its second year of

offering yoga as an alternative treatment for veterans with PTSD.

Drew also noted that the PTSD Clinical Team in collaboration with the Alexandria Museum of Art is instituting an alternative approach to treating PTSD through art expression and education.

The National Center for PTSD Web site, www.ptsd.va.gov, offers excellent information resources for professionals and the public.



The PTSD Coach is a free mobile app with helpful uses, Dr. Kelley Pears told psychologists at a recent conference. It can be downloaded from the web. It was created by the VA’s National Center for PTSD.



Dr. John Fanning (L) speaks with Dr. Kelley Pears (C) and Dr. Leslie Drew (R) after Pears and Drew presented a workshop on Prolonged Exposure Therapy for treating PTSD, at the recent Louisiana Psychological Association (LPA) Convention in Baton Rouge. Fanning is current president of LPA. Drew is PTSD Program Coordinator at Alexandria Veterans Affairs Health Care System, and Pears is a Post Traumatic Stress Disorder/ Substance Use Disorders psychologist at the Alexandria VA Medical Center in Pineville, Louisiana.

Dr. Sandoz and Louisiana Contextual Science Research Group Contribute To 39th Annual Conference, Assn of Behavior Analysis In MN

Dr. Emily Sandoz and members of the Louisiana Contextual Science Research Group from the University of Louisiana–Lafayette presented their work and chaired activities at the recent 39th Annual Convention of the Association for Behavior Analysis International. The convention was held May 24–28, in Minneapolis, Minnesota.

The group presented 14 papers, chaired six symposia and four panels, and provided one training workshop at the conference.

“All of our work is focused on the psychological flexibility model, and the learning processes that contribute to flexibility and inflexibility,” Sandoz explained to the *Times*. “The research we presented this year included the application of the flexibility model and related learning processes to understanding a broad range of human behaviors including body image disturbance, valued living, parenting, stigma academic anxiety, and community response to local tragedy.”

“I think it's incredibly important for students being trained as scientists to experience the process of research from conceptualization to publication,” Sandoz said. “This means that the same students who collect data for my workgroup have the opportunity to present those data at scholarly conferences, and to work with me on writing those data up for publication. This allows them to not only directly experience the tedium, frustration and incredible gratification that are part of the research process, but to contextualize those experiences in the broader context of our international scientific community.”

Those attending the conference this year for the UL Lafayette group were: Skylar Fusilier who presented research, Shiloh Eastin who presented research and chaired a symposium, and Emmie Hebert who presented a conceptual paper, co-authored several research presentations, and chaired a symposium.

Stephanie Caldas, Michelle Jeanis, Jhuan Marcantel, Danielle Moyer, Kevin Murray, and Sunni Primeaux all presented research and chaired either a symposium or panel.

Emmy LeBleu, Ashlyne Mullen, Emily Squyres, and Katie Thibeaux presented research or conceptual papers.

Also attending from the larger ULL community were Rick Perkins, Ph.D., Dave Greenway, Ph.D., and Jillian Jacobelli.

“Every research project we do shares the same theoretical orientation—all from perspective of the psychological flexibility model, Relational Frame

Theory,” Dr. Sandoz explained to the *Times*. But then each student chooses a topic that is of interest to him or her individually.

“I believe this contributes to their investment in the work, and their success as student scientists. I think so far, this is supported, as 10 of the 15 undergrads who have worked with me in the past two years are currently in graduate school, and my first graduate student was just placed in a PhD. program in Clinical Psychology,” Sandoz noted.

“And as far as scientific communities go, ours are pretty amazing,” she said.

Louisiana Contextual Science Research Group (LCSRG) was founded three years ago by Dr. Emily Sandoz with the mission to support the personal and professional development of its affiliates through training scientific inquiry and skills in keeping with the Contextual Behavioral Science (CBS) model, and in doing so, to make a contribution to the alleviation of human suffering. Affiliates of the LCSRG include undergraduate research assistants, graduate research assistants, and research affiliates. All affiliates play a key role in research development, analyzing their own experiences from a CBS perspective to devise specific research questions. They also design research protocols, collect and analyze data, and disseminate the lab’s research through scholarly presentations and publications.

Dr. Sandoz is an Assistant Professor of Psychology and Associate Editor of the *Journal of Contextual Behavioral Science*.

New Lake Charles Internship Acquires APPIC Membership

by Lawrence Dilks, PhD,
Thomas DuVall, MA,
Kimberly Hutchinson, MA,
and Burton Ashworth, MA.

The Predoctoral Internship Program in Professional Psychology located in Lake Charles, Louisiana acquired membership in Association of Postdoctoral and Internship centers (APPIC) in May of this year. The program is in its first full year of operation and will graduate its interns; Kimberly Hutchinson and Thomas DuVall in September 2013. Each will have completed a 2000-hour internship program where they offered supervised services at areas hospitals and agencies in the Southwest Louisiana Region. The internship program has accepted two doctoral psychology interns who will begin their rotations this fall.

Supervising faculty include area psychologists Andrew Thrasher, Ph.D., Allyson Bennett, Ph.D., Ray Hawkins, Ph.D., ABPP, Larry Dilks, Ph.D., Darrell Turner, Ph.D., and Jerry Whiteman, Ph.D.

The pilot program was initiated in 2011 to test the feasibility of the internship program and investigating if the Lone Star Model of community-based internship would work in the Southwest Louisiana community. The application of community based activities proved workable and the first intern class began in September of 2012. The second year of operation has brought greater community awareness, interest, and funding.

The internship program was started due to the large number of clinical psychology doctoral students who were finishing coursework and could not find an internship placement. The internship placement shortage has been a developing problem over the last several decades, with increasing awareness due to the large number of students left without internships as a result of a supply and demand problem.

The advisory board consists of Cameron Melville, Ph.D. Paul Matthews, Ph.D., Terry Fowler, JD, Kashi Yadalam, MD, and Valarie Waldmier Ph.D.

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Obamacare Corner

The Good, the Bad, and the Ugly of the Patient Protection and Affordable Care Act

by J. Nelson

Having read, or perhaps more truthfully scanned, the 2,409 pages of Obamacare, I can tell you it starts in a peculiar way, something about amending the IRS code for first time home buyers in military. Go figure.

Here are the main sections, the “Titles:”

- Title I: Quality, Affordable Health Care for All Americans
- Title II: The Role of Public Programs
- Title III: Improving the Quality and Efficiency of Health Care
- Title IV: Prevention of Chronic Disease and Improving Public Health
- Title V: Health Care Workforce
- Title VI: Transparency and Program Integrity
- Title VII: Improving Access to Innovative Medical Therapies
- Title VIII: Class Act
- Title IX: Revenue Provisions
- Title X: Strengthening Quality, Affordable Health Care for All Americans

Even though the Titles sound interesting and even elegant, the content is jumbled. Constant references to other laws are weaved in making it tough to follow, and I’m pretty sure there are mixed levels of abstraction. But honestly, I can’t be certain because the meaning is not clear. (It is a little more than ironic that one of the provisions in Obamacare is that insurance companies must communicate to people in plain English.)

Probably the biggest reason not to bother reading the Patient Protection and Affordable Care Act it is because of the phrase, “... the Secretary will” It appears so often, some estimate over 1,000 times, passing the ball as often as running with it.

One other irritating thing: it is in script. *How do you like having to read this?* However, on the positive side it is double-spaced.

What most people seem to be reading instead is the “Compilation” that came out in May 2010. This document, prepared by the Office of Legislative Council, a mere 974 pages, is a *little* better. It is at: <http://housedocs.house.gov/energycommerce/ppacacon.pdf>

My plan for “The Obamacare Corner” column is to try and understand, and then communicate to *Times’* readers, about the parts of the law that could interest those in the behavioral sciences.

II

December 24, 2009

Ordered to be printed as passed

In the Senate of the United States,

December 24, 2009.

Resolved, That the bill from the House of Representatives (H.R. 3590) entitled “An Act to amend the Internal Revenue Code of 1986 to modify the first-time homebuyers credit in the case of members of the Armed Forces and certain other Federal employees, and for other purposes.”, do pass with the following

AMENDMENTS:

Strike out all after the enacting clause and insert:

This is the first page of the Patient Protection and Affordable Care Act. The complex law includes many provisions, and also directions for the Secretary of HHS to design programs.

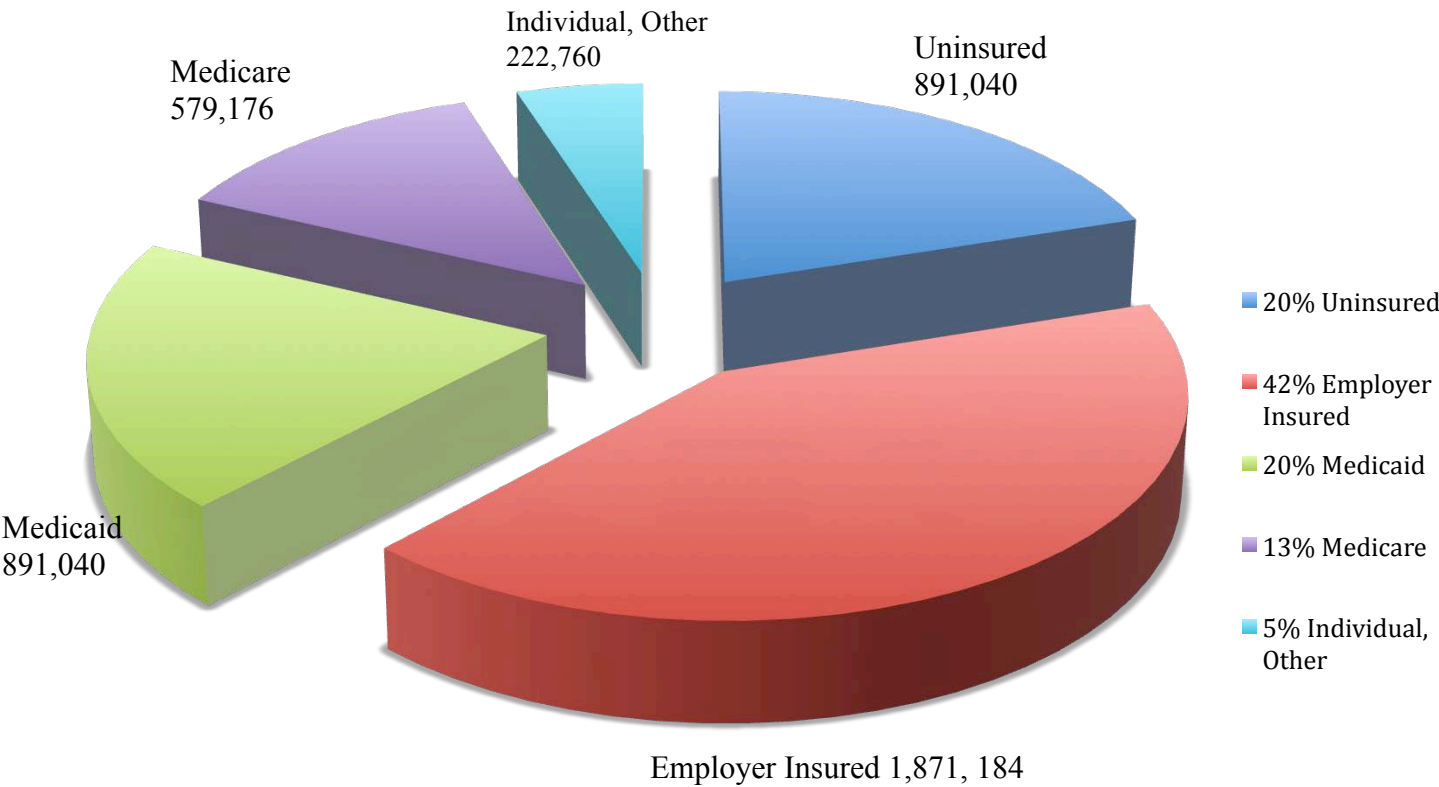
This issue is about some of the basics and in the next issues I’ll dig deeper in to some specifics, like wellness and Medical Homes.

I’ve found that most of us know very little about the law. I had the opportunity recently to ask Dr. Jana Martin, the CEO for the APA Trust, if she knew if psychologists would be allowed to be CEOs of a Medical Home and she said, “We just don’t know.”

I expect to make a lot of errors in this column, because things are complex. I’ve lined up some experts to interview and I hope readers will send me questions, corrections, and comments, so we can do this together. I’ll be at psychologytimes@drjulienelson.com.

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Louisiana Population 4,455,200



Breakdown of
Different Groups
in Louisiana
Before Changes
Caused By
Obamacare

Overview: Major Changes Coming

1. Everyone Into the Water

Obamacare attempts to change the fact that 35 million or so Americans have no insurance. In some or even most of these cases insurance is too expensive for them to purchase.

To get everyone on insurance, the law provides both a carrot and stick. Government subsidies will become available to people below a certain level of income. The stick is the tax/fine, called the “individual mandate” upheld by the Supreme Court.

The fine for not having insurance coverage goes into effect in January 1, 2014. The fine depends on your income level, and ranges from \$95 to \$285. The fine increases every year, reaching a range of \$695 to \$2,085 by 2016, and then adjusted for cost of living afterward.

Both federal subsidies and the expansion of Medicaid was part of the design of Obamacare to get everyone into the water. However, Louisiana and 20 other states have declined to expand Medicaid, and six more states are still debating it, according to Kaiser Family Foundation. So this is a glitch and a conundrum.

Obamacare tells the states they had to make the eligibility requirements for Medicaid more lenient, raising the level to 133 percent of the federal poverty level for all the different groups, such as the disabled, children, non-working adults. However, the Supreme Court decision let them out of it.

In Louisiana, Governor Jindal has said that expanding Medicaid would be too costly for the state in the long run. And he says it would move up to 171,000 people out of the insurance market and also divert another 77,000 from going into the market. Many oppose his decision and argue with his numbers, since the feds were to have nearly completely paid for the expansion.

Ignoring for now the issues with Medicaid expansion, up to 20 percent of Louisiana’s 4,455,200 population may, one way or the other, become newly insured, adding perhaps as many as 800,000+ new people to the insured ranks.

According to *ObamaCare Survival Guide*, the Congressional Budget Office estimated that the additional insured across the entire country could be in the range of 31 million—about the population of Canada.

This brings us to the Exchanges.

2. The “Exchanges”

ObamaCare directs the states to develop their own “Health Insurance Exchange Marketplace.” But if they don’t, the federal government will do it for them. Louisiana and 27 other states are leaving it to the feds.

The Exchange is supposed to help consumers shop for private insurance plans and save money. The idea is that people will have more clear options, standards, and there will be economies of scale. There are four “Plans:” Bronze, Silver, Gold, and Platinum, covering at 60, 70, 80, and 90 percent of healthcare costs. Open enrollment starts October 1, 2013 and coverage goes into effect January 1, 2014.

The Exchange is also where some people will qualify for a federal subsidy for their premiums and for lower out-of-pocket expenses. (*Families USA* notes that the 2013 Federal Poverty Level for a family of four is \$23,550.)

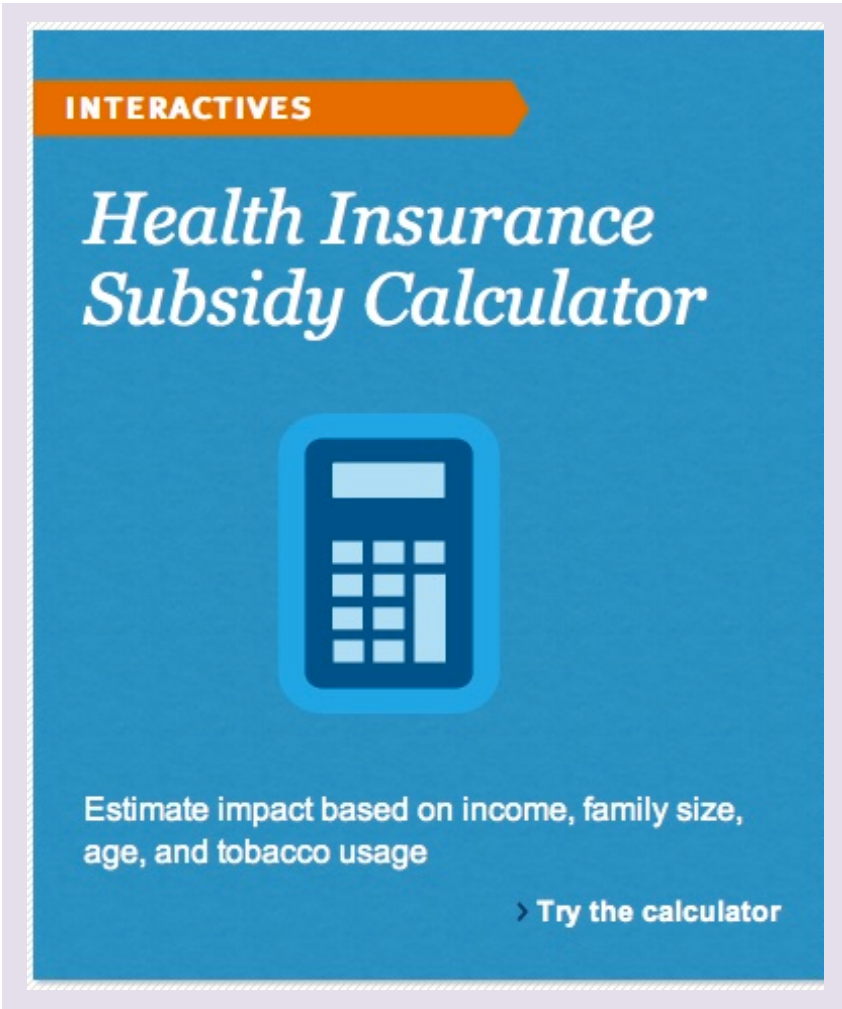
Using the Kaiser subsidy calculator, and setting the age of the adults at 21, non-smoking, we see that the expected federal subsidy is \$9,398 for this family that falls at 100% of the poverty level. The family will pay \$471.00 for their insurance.

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“Essential Health Benefits”

Must be offered in all new insurance coverage by 1/1/2014

- Ambulatory patient services
- Emergency services
- Hospitalization
- Maternity and newborn care
- Mental health and substance use disorder services, including behavioral health treatment
- Prescription drugs
- Rehabilitative and habilitative services and devices
- Laboratory services
- Preventive and wellness services and chronic disease management
- Pediatric services, including oral and vision care



This interactive calculator allows you to estimate where you fall in the range for government subsidies. It is from The Henry J. Kaiser Family Foundation, Health Reform website.

<http://kff.org/health-reform/>

Obamacare Corner

For the same family, with an income of \$47,100, or 200 percent of the poverty level, the subsidy is \$6,902. They pay \$2,967 for their premium.

And for a family with an income of \$94,200, or 400 percent of the poverty level, receives a subsidy of \$920 and they pay \$8,949.

The interesting part of this is that the median household income in the US is about \$50,000. This \$50K figure falls a 435% of the poverty level. In Louisiana, the top fifteen parishes with highest household includes range from \$66,173 (Ascension Parish) to \$48,166 (Terrebonne).

You can try the calculator at <http://kff.org/interactive/subsidy-calculator/>

3. A Stop to the Cherry-Picking

In my view the good part of Obamacare has to do with the consumer protection. It puts an end to the cherry-picking. The section is appropriately called, “PROTECTION AGAINST DUMPING RISK BY INSURERS.”

It reads: “(1) IN GENERAL.—The Secretary shall establish criteria for determining whether health insurance issuers and employment based health plans have discouraged an individual from remaining enrolled in prior coverage based on that individual’s health status.”

A customer can keep their coverage: “GUARANTEED RENEWABILITY OF COVERAGE. (a) IN GENERAL.—Except as provided in this section, if a health insurance issuer offers health insurance coverage in the individual or group market, the issuer must renew or continue in force such coverage at the option of the plan sponsor or the individual, as applicable.”

And, a consumer can get another policy. “PROHIBITING DISCRIMINATION AGAINST INDIVIDUAL PARTICIPANTS AND BENEFICIARIES BASED ON HEALTH STATUS. (a) IN GENERAL. — A group health plan and a health insurance issuer offering group or individual health insurance coverage may not establish rules for eligibility (including continued eligibility) of any individual to enroll under the terms of the plan or coverage based on any of the following health status-related

79,168

Small Businesses in Louisiana
(less than 500 employees)

2,131

Large Businesses in Louisiana
(500 employees or more)

340,627

Single person owned businesses

From 2010 SBA numbers. The health reform law will require employers with 50 or more employees to pay a fine if they don't offer health insurance. But some can shop in the Exchanges.

factors in relation to the individual or a dependent of the individual:

- (1) Health status.
- (2) Medical condition (including both physical and mental illnesses).
- (3) Claims experience.
- (4) Receipt of health care.
- (5) Medical history.
- (6) Genetic information.
- (7) Evidence of insurability (including conditions arising out of acts of domestic violence).
- (8) Disability.
- (9) Any other health status-related factor determined appropriate by the Secretary.”

There is also a rule prohibiting annual and lifetime limits. And, Obamacare requires insurers communicate in plain English about services. (If only lawmakers had to do the same thing.)

The law also set up high-risk coverage group as one of the first

Cont'd next pg

HealthCare.gov

LearnGet Insurance

Español

Individuals & FamiliesSmall BusinessesAll Topics

Search

Welcome to the new HealthCare.gov!


We've changed to help you get ready for the launch of the Health Insurance Marketplace on October 1. Learn about our changes—including where to find some content that used to appear on this site.

The Health Insurance Marketplace is Coming Soon

A new way to get affordable coverage launches October 1.

Answer a few questions to see your options.

START NOW



The “Health Insurance Exchange Marketplace” for those in Louisiana will be developed by the federal government. The Exchange will offer a place where some people and some businesses can shop for insurance. It will help to standardize information about insurance plans and potentially build on economies of scale to help reduce prices. It is also where people can qualify for federal subsidies if their income levels are 400 percent of the Federal Poverty Level or lower.

actions, a decent thing to do, given that medical reason accounts for up to 60 percent of all bankruptcy decisions in the U.S.

4. “Essential Health Benefits”

Obamacare standardizes “Essential Health Benefits” that all insurance packages have to cover by January (those not grandfathered in) which include behavioral health and prevention. These are:

- (A) Ambulatory patient services.
- (B) Emergency services.
- (C) Hospitalization.
- (D) Maternity and newborn care.
- (E) Mental health and substance use disorder services, including behavioral health treatment.
- (F) Prescription drugs.
- (G) Rehabilitative and habilitative services and devices.
- (H) Laboratory services.
- (I) Preventive and wellness services and chronic disease management.
- (J) Pediatric services, including oral and vision care.”

5. Think Prevention

While prevention is a lot more complicated than Obamacare designers think it is, the law does make a stab at it in many ways.

For example, in “SEC. 2717. ENSURING THE QUALITY OF CARE,” these programs are described.

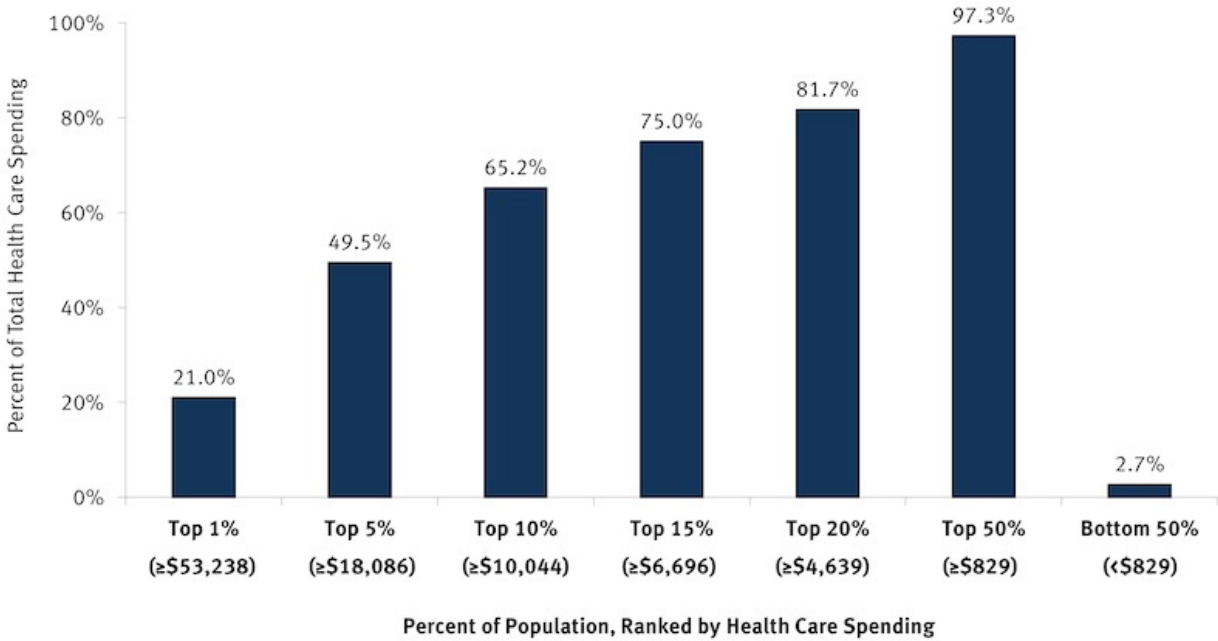
“(b) WELLNESS AND PREVENTION PROGRAMS. —For purposes of subsection (a)(1)(D), wellness and health promotion activities may include personalized wellness and prevention services, which are coordinated, maintained or 2 delivered by a health care provider, a wellness and prevention plan manager, or a health, wellness or prevention services organization that conducts health risk assessments or offers ongoing face-to-face, telephonic or web-based intervention efforts for each of the program’s participants, and which may include the following wellness and prevention efforts:

- (1) Smoking cessation.
- (2) Weight management.
- (3) Stress management.
- (4) Physical fitness.
- (5) Nutrition.
- (6) Heart disease prevention.
- (7) Healthy lifestyle support.
- (8) Diabetes prevention.”

Rules came out on May 29 to guide wellness plans for group health plans and group health insurers. You can review these rules at <http://www.dol.gov/ebsa>.

Next month: More on Obamacare and Prevention, Wellness

Concentration of Health Care Spending in the U.S. Population, 2010



NOTE: Dollar amounts in parentheses are the annual expenses per person in each percentile. Population is the civilian noninstitutionalized population, including those without any health care spending. Health care spending is total payments from all sources (including direct payments from individuals and families, private insurance, Medicare, Medicaid, and miscellaneous other sources) to hospitals, physicians, other providers (including dental care), and pharmacies; health insurance premiums are not included. SOURCE: Kaiser Family Foundation calculations using data from U.S. Department of Health and Human Services, Agency for Healthcare Research and Quality, Medical Expenditure Panel Survey (MEPS), Household Component, 2010.



Where does health care spending come from? Most of the healthcare spending in a given year is by the top 5 percent of the population, as shown in this graph from the Kaiser Family Foundation. The bottom 50 percent spends less than \$829. The bottom 80 percent spends \$4,639 or less. According to the Kaiser and the CDC, the main drivers of health care costs are technology and prescription drugs, chronic disease, aging of the population, and administrative costs.

Obamacare — Will It Solve Our Problems?

We have big problems when it comes to health, healthcare, and healthcare costs in the US.

We rank 1st in health costs, but last in industrialized nations for many measures of health status. A report in the *New England Journal of Medicine* noted that 18 percent of patients are harmed by medical care.

In 2000 the Institutes of Medicine reported that medical errors were the eighth leading cause of death in the US. An estimated 450,000 preventable medication-related events occur in the US yearly, according to Mercola.com. He notes that 3.68 billion prescriptions were filled in the US in 2009, averaging to 12 prescriptions for every person in the country.

According to the Kaiser Foundation and the CDC, the main drivers of health care costs are technology and prescription drugs, chronic disease, aging of the population, and administrative costs.

Kaiser also points out that health costs are not equally distributed. In a given year, it is the top 5 percent who spends almost 50 percent of all health care dollars. On the other end, 80 percent spend about \$4500 or less. And nearly half, the bottom 50 percent, spend only \$829 or less.

Will Obamacare solve our real problems? Not likely. Overlaying one bad system with another bad system won’t get at the underlying misalignments. Third-party health payments now seem hopelessly meshed with catastrophic coverage, each requiring different interventions. The consumer is uninformed and herded by his fast think brain toward superficial solutions.

I’m reminded of a recent Medscape column by Dr. John Marshall. In “Walking Improves

Cancer Outcomes,” he noted a study in *Journal of Clinical Oncology* that people who had colon cancer did much better if they exercised. He wrote that with 8.75 hours of exercise per week, the risk reduction is 0.58. “That is better than any chemotherapy we have given to anyone,” he said.

But only a consumer could make such a choice, not easy in a culture that promotes high tech, costly symptom treatments. And everyone knows that lifestyle changes can be much more difficult and complicated than taking a pill, or for that matter, going in for chemo.

Looking at the most radical changes I’ve seen in my lifetime, with the impact on the taxpayer and business notwithstanding, I’m astounded that anyone would attempt such a thing. It seems both naïve and tremendously overconfident. I can tell you from experience that even a simple, well thought out intervention in a large social system is extremely tricky. There is just too much about human behavior that is invisible and unpredictable.

And, I’m no economist, but just roughly looking at the subsidies offered I think the government is going to need a bigger printing press.

Having said that, I think that there are opportunities for those in the psychological and behavioral sciences to help make things work better, to help align incentives, and help uncover more of the important variables in the healthcare industry. Obamacare might just be a springboard for some of the more innovative and creative people in our community to build in win-win approaches to our large-scale problems.

Up-Coming Events



In Honolulu, a scenic drive off Oahu’s east shore. This year’s American Psychological Association will meet in Honolulu.
(Photo courtesy of Hawaii Tourism Authority/Tor Johnson.)

Louisiana Professors, Researchers Attend APA July 31-August 4 In Honolulu, Hawi’i

The American Psychological Association will hold its annual convention in Honolulu, Hawi’i, from July 31 to August 4. Louisiana professors, psychologists, graduate and undergraduate researchers will present a number of presentations and research projects.

Included this year are Tulane’s Dr. Stacy Overstreet and Dr. Bonnie Nastasi, University of Louisiana Monroe’s Dr. Karen Kopera-Frye and Dr. Bill McCown, Dr. Darlyne Nemeth, Dr. Lee Matthews, Loyola’s Dr. Janet Matthews, Drs. Greg Gormanous and Warren Lowe, Dr. Kelly Ray, and a number from LaTech including Drs. Guler Boyraz, Mary M. Livingston, Walter Buboltz, Janelle McDaniel, and Steve Jenkins.

Dr. Lee Matthews will chair a symposium, “Essential Topics for SPTAs—Ethics, Advocacy, Service, and Education.” Monroe’s Dr. Karen Kopera-Frye and Dr. Bill McCown serve as co-authors for graduate

student Janease Traylor’s research, “Surveying State Psychological Association Members for Recommendations on Membership Service.” Additional co-authors are graduate student Sandra Dillion, and psychologists Drs. Susan Dardard and Gail Gillespie.

Loyola’s Dr. Janet Matthews will participate in a symposium, “A Blueprint for the Future—Preparation of Health Service Psychologists,” along with past APA president Dr. Carol Goodheart and chair Dr. Frank Andrasik.

Drs. Greg Gormanous and Warren Lowe will chair the symposium, “Competing Coaches and Coachees—Mock Licensing Board Hearing.” Dr. Gormanous will take the role of Administrative Hearing Officer, and participants will play the roles of an administrative hearing officer, administrative hearing deputy, psychologist’s

attorney, complainant, board attorney, and defendant.

Dr. Kelly Ray will be a participant and first author in a symposium, “Nuts and Bolts of Successful Practice—Early Career Options.”

Dr. Darlyne Nemeth will chair a symposium, “Katrina Versus Sandy—The Psychological and Neurocognitive Aftermath of Environmental Trauma.” Also participating will be Dr. Judy Kuriansky (from New York, who has been involved with Nemeth’s work in Louisiana since Katrina), Chelsie Songy, BA, and Dr. Robin Gay.

Chelsie Songy will also present her research, “Comparison of TEA-ch and TOVA Results for School Children with ADHD,” co-authored with Amber Gremillion, BS, and Dr. Nemeth. Songy and co-authors will present a comparison study of the Test of Everyday Attention in Children (TEA-ch) and Test of Variables of Attention (TOVA) in school-aged youngsters, finding that when traditional methods of ADHD assessment yield questionable results, the TEA-ch can offer valuable information.

Amber Gremillion, BS, will present her research “Using NEPSY-II Subtests to Identify Asperger’s Disorder in School-Aged Children.” Co-authors are Dr. Nemeth, C. Songy, BA, and Ayesha Khurshid, MS.

Dr. Nemeth will also present, “Deception Success: The Backdoor Approach to Forensic Neuropsychological Assessment.” Co-authors are Gremillion, Songy, and Khurshid.

Authors will discuss ways to reduce the attempts by either patients of their referral sources to obtain services under false pretenses, including: Requiring payment prior to the Initial Clinical Interview; Assessing the initial call/referral to this office; Using the HIPAA compliant forms for office rules and procedures; Addressing the deception when discovered; Discontinuing involvement in the case; and Dealing with attorneys.

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Susie Marie PhD



Having two babies 19 months apart was difficult. Two in diapers for too long strained my sense of humor. Cloth diapers for the one with sensitive skin added to the daunting responsibilities of motherhood. Going to school, doing well, getting a doctorate had been so easy. Going without sleep, without contact with the outside world, immersed in this new reality, strained my sense of order.

Fortunately, those arduous early days are long gone, and I am the proud mother of two remarkable adults. The rewards of raising them to become caring and responsible individuals are beyond measure. They are interesting and fun and wonderful. They are doing well, making their own way in life, and I have been free to enjoy my simple life in the country, and my sleep.

Being happily settled in a rural community, after years of being a mommy in a big city, has helped inspire my new media adventures. I find my immediate surroundings far more fascinating and important than what lies beyond these

fields and woods, so once again I am less absorbed in the outside world. This time I'm more focused on what is happening on the land outside my door.

I do have the familiar feeling of having a couple of newborns, though. I am creating a brand new television show, "South River Stories®," and starting a brand new business, South River Stories, Inc. The show gives the business purpose and the business gives the show structure. I need both and I need to raise them to maturity.

I am living the long days and nights of early parenthood. Instead of a newly furnished nursery, I have a newly equipped office. Instead of diaper bags, I have camera bags. Instead of reading stories to my little ones, I am writing stories for a new audience. Bringing order to this new reality is hard work. I need sleep.

APA in Hawi'i Continued

Tulane's Dr. Stacy Overstreet and Dr. Bonnie Nastasi will chair the symposium, "Social-Emotional Universal Screening—Implications for Practice in Low-Resource, High Risk Contexts." First author, Shereen Naser, MS, will present, "Predictive Validity of the BESS Student Report Form." Paulette Carter, LCSW, and Alexandra Sims, MS, are co-authors.

Tulane's Meredith Summerville, MEd, will present "The Ecomap As Self-Report Mental Health Screener for Early Elementary Students," with co-author Nastasi.

Also presenting from Tulane is Allisyn Swift, MS, with her "Self-Inflicted Injury and Suicidal Ideation in Young Children Participating in Universal Screening." Dustin Mars, MS, is co-author. Also, Jorge Verlenden, BS, will present "Triage Strategies in Low-Resource, High-Risk Contexts," with co-authors Patrick Bell, MS, and Elizabeth Earnshaw, MSW.

More Coverage Next Issue

The Psychology Times

The *Psychology Times* is provided as a community service for those in the practice, teaching, and science of psychology in Louisiana and related individuals and groups. The *Times* offers information, entertainment, and networking for the Louisiana psychological community.

None of the content is intended as advice for anyone.

The Psychology Times

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Professional Shared Office Space for Rent: **Baton Rouge and Kenner** professional office space for rent by the hour, day, week, or month. Group room available upon request. No sublease required for part-time use. Utilities included. Support staff, services, and supplies available upon request and prior arrangements. Affordable rates. Please call 225-769-2533 for details.

Position Wanted: Research Associate, Health Psychology. Accomplished and dynamic masters level professional with degree in health psychology. Competencies include: Health Care · Patient Assessments · Patient Relations · Health & Safety Regulation · Care Coordination Policies / Procedures Compliance · Time Management · Needs Assessment · Email for more info at Neurology579@yahoo.com

Private Office Space for Rent in complex with other mental health professionals: **Baton Rouge, South Sherwood area**. Utilities included. \$650 per month. Call 850-564-0077 for more information.

LSU Positions Available

The Clinical/Counseling Psychologist position is a senior staff position in the Mental Health Service of the Student Health Center, Louisiana State University. The professional position will report to the Director of Mental Health Service. This is a full time (100% effort/40 hours per week) position for 12 months per year. Qualifications: Doctoral degree in Clinical/Counseling Psychology; license to practice psychology in Louisiana or obtainment of LA license by time of hire; three years of clinical experience. Posted 5-28-2013, open until filled.

Professor, Faculty: Roy B. Crumpler Endowed Chair in Psychology. Duties will include teaching and supervision of assessment and treatment in our APA accredited Ph.D. program in clinical psychology, undergraduate teaching, attracting research funding and maintaining a highly visible research program. Qualifications: Ph.D. in Clinical Psychology; established national/international reputation; should be licensed or license eligible. Posted 11-2-2012, open until filled.

Instructor, part-time: School of Social Work –College of Human Sci and Ed. The Instructor teaches one course in any of the following areas during the Fall 2013, and Spring 2014 semesters: Human Diversity & Oppression, Human Behavior and the Social Environment, Program and Practice Evaluation, Research, Social Work History and Policy, and Social Work Practice, Juvenile Delinquency, electives and internship courses. Qualifications: (Clinical Practice Courses) Master's of Social Work (MSW) degree; three years of post MSW practice experience; active Louisiana Clinical Social Work license (LCSW) in good standing. (Non-Clinical Practice Courses) Master's degree in Psychology or a closely related field and five years of professional experience OR a Doctorate in Psychology or a closely related field. Posted 4-17-2013, until filled.



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To All Our Readers
Have a Happy and Safe
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The Psychology
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