

# Reports to the Membership

*The following are edited versions of the annual reports of the APA Secretary, Treasurer, Medical Director, Speaker, and Speaker-Elect and the chairpersons of the APA Committee on Bylaws, Membership Committee, Committee of Tellers, and Elections Committee. The reports of the Secretary, Treasurer, Medical Director, and Membership Committee have been abbreviated; full versions of most can be obtained from the Central Office or APA web site, as indicated in each report. The full reports were presented at the APA annual business meeting in Atlanta on May 22, 2005.*

## Report of the Secretary

*Nada Stotland, M.D., M.P.H.*

It is my constitutional duty and personal privilege as Secretary of the American Psychiatric Association to report to the membership on the actions taken by your Board of Trustees over the past year. Following are some of the highlights.

### Membership

Membership in the American Psychiatric Association continues on a slow rise. The membership committee has explored many new strategies for recruitment and retention, including the possibility of paying dues month by month automatically by credit card and provisional membership for nonmembers wishing to join at our annual meeting. Active efforts by members of the Board and Assembly, as well as district branches, have successfully convinced many of those about to be dropped to remain in the fold.

### Information Technology

Implementation of the new association management system continues on schedule. The APA web site, always a work in progress, as befits an organization always at work, is more informative and accessible than ever before. Our many members seeking continuing medical education and preparation for recertification can now find the information they need and can track their own progress on the web site. Suggestions for improvements are always welcome.

### Continuing Medical Education

The journal *FOCUS* remains successful, as does Grand Rounds On-Line. A video course has recently been added to our on-line offerings. Our annual meeting in May is the largest scientific psychiatric meeting in the world.

### Public Education

Our Director of Communications and Public Affairs, Lydia Sermons-Ward, returned from maternity leave and introduced little Derrick to the Board. She and her staff have launched an exciting new public information campaign: "Healthy Minds, Healthy Lives." Informed by the findings of focus groups with target audiences and utilizing a modernized draft APA logo, this campaign will place public service announcements in major national magazines. We must show the public that we are not only highly trained physicians, but also an approachable, helpful, diverse group of caring professionals.

### District Branch Support

With the support of APA staff, administrators of district branches and state associations are actively sharing expertise and developing new resources, including a manual to guide colleagues and families when a psychiatrist dies or abruptly ceases practice and suggestions for the development of district branch foundations. The central organization provides both financial and operational support for membership, advocacy, and other activities of district branches.

### Finances

There are no secrets in the APA budget; it is available to members on our web site. Our Financial Oversight Committee confers with staff on a monthly basis to assure that income and expenditures stay within budget. Our books are balanced and our reserves are growing. Our auditors have found our books to be nearly perfect and in compliance with appropriate financial procedures. Our Investment Oversight Committee has made suggestions giving us higher returns on investments without sacrificing safety.

### Natural Disasters

During a time of crisis, APA reached out to the victims of the tsunami in east Asia and to our colleagues caring for them.

### Government Relations

The leadership and staff of APA have contributed APA's expertise, time, and money to counter attempts, in states all over the country, to legislate permission to practice medicine for practitioners who have not attended medical school. Spearheaded by dedicated district branch and state association members, and in spite of huge sums and efforts invested by our opponents, our efforts have, for the most part, been highly successful.

APA has responded actively to hearings of the U.S. Food and Drug Administration on selective serotonin reuptake inhibitors (SSRIs) and other issues, providing expert testimony and preparing informational documents for the press and the public. We have also testified, by invitation, about several bills in the United States Congress, and we have worked to end the discriminatory Medicare copayment for psychiatric services.

For the first time, early-career psychiatrists from each state were invited to a leadership training program during the Institute on Psychiatric Services. They received information and practiced skills in working with government officials and in dealing with the media.

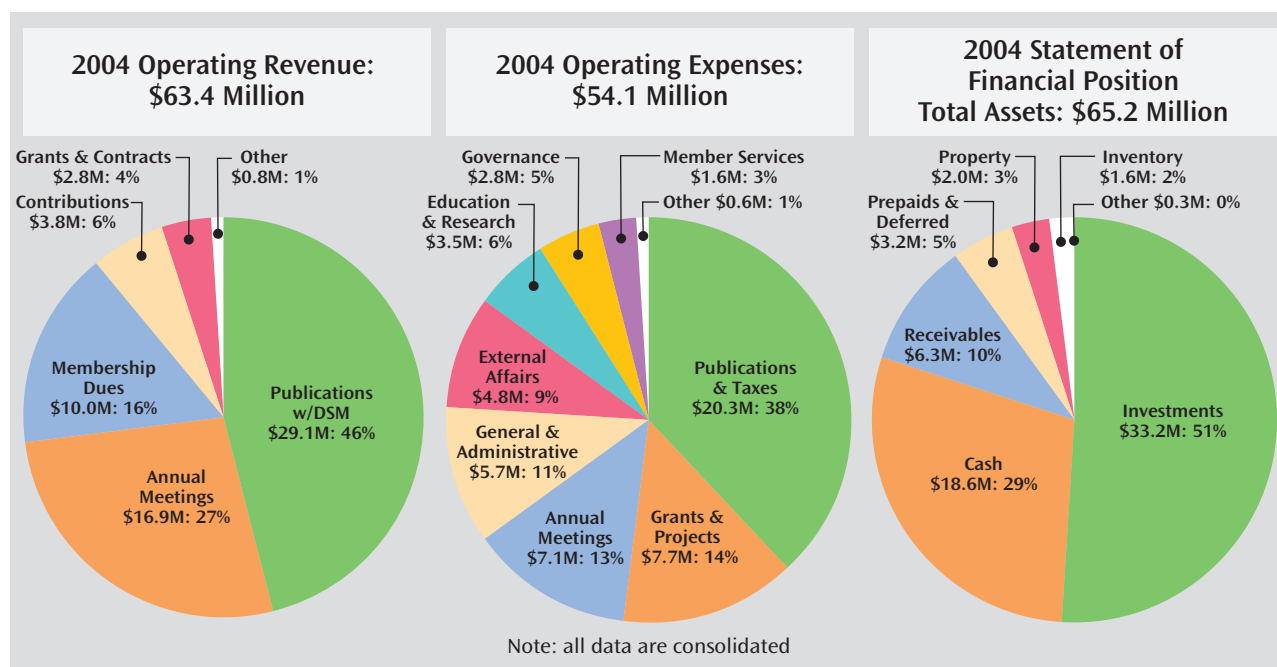
### Publishing

American Psychiatric Publishing, Inc. (APPI), is the largest and finest psychiatric publishing house in the world. Many of our books and journals are translated into other languages and used by colleagues far and wide. APPI continues to contribute financially to APA while at the same time publishing less profitable books that are important to psychiatric clinical care, teaching, and research.

### Organizational Structure

In response to an Assembly action paper and in order to make titles consonant with responsibilities, the Board has developed and sent to the Assembly a bylaws change that would confer upon the Medical Director rather than the President the title of Chief Executive Officer. The Board reasoned that APA has a new President each year, sometimes with no previous experience on the Board, and the President is not based in Washington and cannot manage the day-to-day affairs of the Association.

The APA component structure was downsized several years ago. Many committees are accomplishing significant tasks by electronic correspondence, saving the members travel time and the association considerable expense.



### Other New Initiatives

Past President Marcia Goin, M.D., convened a task force and national meeting on the costs to society of confining so many individuals with mental illnesses to jails and prisons rather than providing care.

### Conclusion

I would like to thank the hardworking and skilled APA staff and my colleagues on the Board, in the Assembly, and in the membership for their support and their invaluable contributions.

Actions taken by the Board can be viewed at the Members Corner of the APA web site ([www.psych.org](http://www.psych.org)) by clicking on "Board of Trustees" under "APA at a Glance." Financial reports are also available in this section of the Members Corner (click on "Financial Information").

## Report of the Treasurer

Carolyn B. Robinowitz, M.D.

### Overview

The Association (American Psychiatric Association; American Psychiatric Publishing, Inc.; American Psychiatric Institute for Research and Education; and American Psychiatric Foundation) continued the positive trend from 2003, finishing the year with a surplus and with no borrowing needed. This trend can be attributed to the continued focus on strengthening APA's financial position through management's stringent spending controls, pursuit of other streams of revenue, and leadership oversight of financial matters. Additionally, the 2004 annual meeting in New York set attendance records, leading to revenue that was \$2.5 million higher than budgeted. Advertising revenue also exceeded estimates for the year. During the year, the Board of Trustees voted to commit any surplus for the year to the Reserve Replenishment Fund, demonstrating APA's commitment to building reserves.

### December Statements

Audited financial statements are available on request from the Finance and Business Operations department (703-907-7343 or [CWilliams@psych.org](mailto:CWilliams@psych.org)) and at the Members Corner of the APA web site ([www.psych.org](http://www.psych.org)) under "Financial Information" in the

"APA at a Glance" section. In 2004, the Association experienced a net surplus from operations, before investment income and transfers to and from reserves, of \$8.4 million, a substantial increase from the 2003, 2002, and 2001 surpluses of \$7.8 million, \$1.2 million, and \$45,000, respectively.

The investment income for 2004 of \$1.9 million includes \$700,000 in unrealized gains attributable to stock market performance, \$737,000 in interest and dividends, and \$441,000 in realized gains since Dec. 31, 2003.

### Membership Dues

The receipts from membership dues of \$10 million in 2004 slightly exceeded the budget. The total number of members in dues-paying categories increased from January 2004 to December 2004 by 522 members, including increases in the General Member, Fellow, and International Member categories.

### Cash and Investments

As of Dec. 31, 2004, cash was increased by \$2.9 million over the prior year's balance, owing to an increase in cash receipts from the collections of membership dues, publishing sales, and annual meeting revenue offset by reductions of cash related to increasing the investment portfolio. During 2004, the Board approved the creation of an investment pool composed of the APA and APPI portfolios. The investments on Dec. 31, 2004, were \$7.8 million higher than on Dec. 31, 2003, owing to the transfer of \$7 million into the pool and the investment performance offset by the write-down of the investment in the Medem web site. Borrowing to cover cash flow needs was not necessary in 2004 and is not anticipated in 2005.

### Fiscal Management

The Financial Oversight Committee continued to meet regularly during 2004 to review current financial activity. The committee was established at the end of 2001 to oversee the implementation of the annual financial plan of the organization. The Financial Oversight Committee is charged with reviewing the year-to-date financial results, the year-end projections, the cash position, cash forecasts, borrowing activity, and the use of investments. The committee also establishes and approves course corrections to ensure that budgetary goals are achieved; such corrections include reallocating budget line items, reviewing staff

proposals to reduce or eliminate expenses, and approving the implementation of a contingency plan should one be necessary.

### Financial Data

The figure displays APA's financial position and revenue and expenses for 2004.

### Conclusion

The 2004 year-end results are positive and exciting, and the 2005 budget is balanced with a line item for a contribution to the Association's reserves. Overall, the Association's financial condition is improving. Net income from revenue-producing activities, which funds many of the Association's initiatives, remains stable. With increased oversight and accountability mechanisms, spending is steady. The cash situation is the strongest it has been in years. Levels of long- and short-term debt are minimal. I am confident that by continuing to follow prudent spending policies and building up the reserve, while seeking alternative revenue sources, the Association is building a solid foundation for the future.

## Report of the Medical Director

*James H. Scully, Jr., M.D.*

When I joined the APA staff 2 years ago, my primary focus was to further the mission and work of the Association. Specifically, I committed to achieve the following: 1) balance APA resources against competing demands, 2) promote effective use of human, financial, physical, and technological resources, 3) provide high-quality services to our members and ensure that each interaction they have with APA is a positive one, 4) provide cost-effective programs and services that meet the needs of our members, 5) provide an effective management team with responsibility, authority, and accountability, 6) expand alliances that support and enhance the Association's mission and priorities, 7) strengthen the partnerships between APA and external organizations, and 8) build a mission-based organization that effectively carries out the Board of Trustees' policies and fulfills the mission of the Association. As year 2 ends, I am proud of our many accomplishments and am clear on future priorities and directions for the Association.

The year 2004 was productive for the Association. We ended the year with a surplus, we had a record-breaking annual meeting in New York, our overall membership increased, we maintained a significantly low employee turnover rate, and we recruited several highly skilled professional employees. This report highlights some of our many achievements during a year that was filled with many challenges, opportunities, and successes.

In the area of administration and personnel, we were fortunate to recruit and hire two talented and professional staff to head APA departments. *Annelle Primm, M.D.*, was hired in April to head the APA Office of Minority and National Affairs. In June, *Lydia Sermons-Ward* joined APA to head the Office of Communications and Public Relations.

### Business Operations

In the area of *finance*, we strengthened our internal control and accounting systems, and we implemented policies and procedures that enhanced our effectiveness and efficiencies.

In the area of *membership and member relations*, we conducted a business process analysis of the membership operations. We compared our system with those of other highly effective medical associations to assist in developing standards, strengthen internal controls, identify inefficiencies, and implement changes to improve the process. As of year's end, 48 (64%) of the district branches were participating in the Central Membership Processing Pilot Project.

In the fall, we created a *membership outreach program* designed to provide new district branch executive staff with an orientation on APA membership policies and processes. On Nov. 3–5, staff held the first professional skill-building conference for leaders and executive staff of district branches and state associations.

During the year, I visited many *area councils and district branches* to hear and address their concerns about APA.

### Office of Minority and National Affairs

The Office of Minority and National Affairs has been extremely active this year. The office partnered with the Division of Education to create and produce a videotape titled "Real Doctors: Psychiatry in Action." This recruitment videotape targets minority medical students who are interested in careers in psychiatry and encourages the provision of care and services to special populations.

### Education

I am especially pleased to report that the *157th APA annual meeting*, held in New York, May 1–6, was the largest meeting ever held in the history of the Association. The total registration was 26,728, exceeding the previous year's total by 5,365. The *56th Institute on Psychiatric Services*, "Mental Health Disparities in the Community," was held at the Hilton Atlanta Hotel in Atlanta on Oct. 6–10, 2004. There were 1,487 registrants who attended the meeting.

All on-line practice guidelines courses are now available free of charge to members on the continuing medical education (CME) web page of the Members Corner section of the APA web site ([www.psych.org](http://www.psych.org)).

Building on the success of its first year, *FOCUS: The Journal of Lifelong Learning in Psychiatry* has continued its clinically based articles and annual self-assessment examination. In addition to providing up to 40 CME category 1 credits for the American Medical Association's Physician's Recognition Award per year, the *FOCUS* program (journal and examination) has been approved by the American Board of Psychiatry and Neurology as part of a comprehensive lifelong learning and self-assessment program, in keeping with the requirements for maintenance of certification mandated by the American Board of Medical Specialties.

### Information Systems

The Office of Information Systems has been working diligently on planning and implementing the *association management system (Project Fusion)*. The projected "go live" date is July 2005 and will include functionality for the membership, governance, answer center, and accounts receivable departments. District branch functionality will follow in 3–5 weeks after the additional testing that is required of the interface between The Integrated Membership Services Solution (TIMSS) software and the web.

### Advocacy

We continue to strengthen our advocacy efforts through collaborations and coalitions with other organizations. As a part of the Office of Healthcare Systems and Finance's continuing collaboration with the National Association for the Mentally Ill (NAMI) and the National Mental Health Association, a 2-day working conference was held Jan. 25–26, 2004, on maintaining *access to treatment and service under Medicaid*.

The Office of Communications and Public Affairs completed the development of a *communications and marketing outreach campaign* for APA.

In April 2004 the Coalition for Fairness in Mental Illness Coverage, chaired by APA, commissioned Public Opinion Strategies to conduct a poll of likely voters to help gauge what level of public support exists for the *Mental Health Equitable Treatment Act*. The poll found that 83% of the Americans responding believed that health insurance policies should provide coverage for mental illnesses that is at least equal to that provided for physical illnesses and injuries.

The *Academic Consortium* was held on March 23–24, 2004. Nineteen participants attended, representing seven organizations: the American Academy of Child and Adolescent Psychiatry, NAMI, the Depression and Bipolar Support Alliance, the Society of Biological Psychiatry, the American College of Neuropsychopharmacology, the American Association of Chairs of Departments of Psychiatry, and APA.

On Sept. 13–14, 2004, two advisory committees of the Food and Drug Administration held a contentious joint public hearing on *antidepressant use in pediatric patients* and further appropriate warnings. On a split vote, the advisory committee recommended “black box” warnings for all antidepressants. In response to this action, APA developed ParentsMedguide.org, which is a helpful resource for parents about antidepressants.

APA continues to view the *Medicare Mental Health Copayment Equity Act* as a top legislative priority. This legislation would end the discriminatory 50% copayment requirement on outpatient psychiatric services under the Medicare program.

APA supports and continues to work with the American Academy of Child and Adolescent Psychiatry to secure passage of the *child psychiatry workforce bill* introduced by Representative Patrick Kennedy (D-R.I.). The legislation was substantially crafted by an APA-sponsored legislative fellow, and staff of APA and the American Academy of Child and Adolescent Psychiatry provided considerable input and technical assistance in the production of the legislation. The two organizations have jointly testified in support of the legislation as part of a hearing on attention deficit hyperactivity disorder in children.

As a part of APA's efforts to help plan for *scope-of-practice* struggles, the Division of Government Relations annually disseminates a needs assessment survey to district branches and state associations that includes queries about the resources they are able to commit to scope-of-practice matters and their expected legislative agendas. In 2004, 23 states reported that they may be at risk of psychologist-prescribing legislation. Each district branch and state association also recently received the updated resource packet for use in combating psychologist-prescribing legislation.

### **American Psychiatric Foundation**

For 2004 the foundation set a fund-raising record by generating \$1.3 million (estimated) in financial support of its own programs and activities. Of that amount, \$980,000 (estimated) went to the annual fund, which fell just short of the goal of \$1 million.

In 2004 the foundation had its best year for fund-raising from individuals. Gifts from individual donors increased by 91% in 2004, and it is anticipated that this momentum will carry forward in 2005.

At the conclusion of 2004, the foundation had five members in the new Foundation Circle (lifetime giving of \$25,000 or more) and 28 members in the Benjamin Rush Circle (lifetime giving of \$10,000 or more). Fund-raising on behalf of APA and the American Psychiatric Institute for Research and Education finished strongly in 2004 as well.

### **American Psychiatric Publishing, Inc. (APPI)**

The total advertising revenue (unaudited) for 2004 climbed to \$11.1 million, exceeding that in 2003 by \$845,000 (8%). Most of the additional revenue stemmed from the rise in pharmaceutical advertising of 11% over the amount in 2003, to \$8.4 million.

The preliminary total of advertising revenue for *Psychiatric News* in 2004 was \$7.5 million, a gain of \$780,000 (12%) over the amount in 2003. The substantial revenue increase was primarily due to pharmaceutical advertising revenue rising 16% over 2003, to \$5.2 million.

APPI ended a successful year of book sales. Earnings from royalties and translations of APPI titles reached record highs in 2004.

### **American Psychiatric Institute on Research and Education (APIRE)**

APIRE, as a subcontractor with Platinum Network, Inc., has developed a Small Business Innovative Research (SBIR) application for the National Institute of Mental Health. Platinum Network will develop a shared on-line accessible, web-based interactive training structure for psychiatric research trainees enrolled in APIRE's Program for Minority Research Training in Psychiatry.

### **APAPAC**

In 2004, there was a substantial increase in the activity of the APA political action committee (APAPAC). During the 2003–2004 election cycle, APAPAC contributed \$365,000 to 144 candidates

for Congress (representing 43 states) and other party-affiliated political committees, and it hosted events for 65 members of Congress. On Election Day 2004, APAPAC enjoyed tremendous success with 112 (94%) of the 119 candidates it supported winning on November 2.

## **Report of the Speaker**

*James E. Nininger, M.D.*

It has been my honor and privilege to serve as Speaker of the Assembly this past year. Our Assembly and the American Psychiatric Association remain strong and poised to meet the challenges ahead of us. Working together and in close collaboration with the Board of Trustees and the Medical Director, we have confronted many challenges and we have had many successes. We are addressing issues of prime importance to the field and to the Association, and we are strengthening our relationships with our district branches, state associations, and members.

This year I urged the Assembly to raise its profile, in particular to encourage members to take better advantage of their district branch representatives. Initiatives have included the creative use of list serves and timely electronic forwarding of past actions and information items to the Board and Assembly. To help the smaller states, APA has made progress in defining the necessary infrastructure required for effective advocacy and membership recruitment and retention and in making funds available to fill these needs.

During my year as Speaker, I worked to maintain the focus of the Assembly on actions that improve access to treatment for our patients and that facilitate education of our members in legislative advocacy and public relations. To that end, I held a focused plenary session at the fall Assembly meeting on workforce issues in psychiatry, including the use of telemedicine and the provision of care to our patients in rural areas. The Assembly heard from a panel that examined patient care from a workforce perspective.

Edward Salsberg, director of the Center for Workforce Studies of the Association of American Medical Colleges, provided an overview of workforce issues in medicine, concluding that the demand for physician services nationwide will continue to rise at a time when enrollment in medical schools has increased but is not going to be sufficient. Our Medical Director, Dr. James Scully, gave an overview of workforce issues in psychiatry, noting that the public aspect of psychiatry sets it apart from other specialties (there is no public radiology or public pediatrics). Psychiatry has grown slowly as a specialty, with child psychiatry growing somewhat more rapidly. Dr. Cassandra Newkirk, the mental health director at Rikers Island penitentiary in New York City, discussed psychiatric workforce issues in the corrections field.

In addition to the focused plenary session, the Assembly heard in-depth reports from the Council on Healthcare Systems and Financing, the Council on Member and District Branch Relations, the Committee on Advocacy and Litigation Funding, and the Council on Advocacy and Public Policy. Last, the Assembly heard from the New Mexico district branch on its initiative with rural workforce problems and from the Central California Psychiatric Society on its initiative with telemedicine.

The November Assembly coincided with the inaugural Washington, D.C.-based National Alliance for the Mentally Ill (NAMI) Walk on Nov. 6, 2004. Assembly members were able to attend the rally that kicked off the event. Staff, family, and friends of APA, the American Psychiatric Foundation, and American Psychiatric Publishing, Inc., participated in the walk to raise funds for programs that support, educate, advocate, and encourage research on mental illness.

In addition to having responsibilities at the Assembly meetings, the Speaker sits on the Board of Trustees representing the Assembly. While the Assembly serves in an advisory capacity, it has a profound effect on helping to shape policy and has played a role in the continued improvement in financial oversight and accountability in APA during recent years. One very important task of the Speaker is to serve on the Finance and Budget Committee and the Financial Oversight Committee. I am pleased to report

that with the leadership of our Medical Director and the able assistance of Terri Swetnam, our Chief Financial Officer, the Association shows a positive balance. Our problems are not over yet, however, and we must maintain responsible stewardship of the budget. I am confident that those who follow me are up to the challenge.

I worked closely with President Dr. Michelle Riba during the year to address membership recruitment and retention issues. The Assembly held thorough discussions about membership recruitment and retention both during the plenary sessions and during area council meetings held during the year. The Assembly held a membership roundtable in January 2004 and invited representatives from both Washington state and Texas district branches to discuss membership issues. Since that time, the Washington State Psychiatric Association has brought forward a pilot plan for membership recruitment and retention that was approved by the Board of Trustees. Staff and members of the Washington State Psychiatric Association are now working closely with the national headquarters to fully implement the plan. The Texas Society of Psychiatric Physicians has entered into relationships with two new entities, the Texas Academy of Psychiatry and the Federation of Texas Psychiatry. The Board of Trustees has reiterated APA's long-standing policy of dual membership and is currently meeting with representatives of the Texas Society of Psychiatric Physicians to resolve outstanding concerns about this issue.

I recently attended APA Advocacy Day (March 13–16, 2005) in Washington, D.C., a forum for briefing a group of over 90 APA physician leaders who then ascended Capitol Hill to educate and encourage our Representatives and Senators to support legislation vital to the welfare of our patients.

All in all, remarkable work is being carried out at all levels of the Association: on the Board, in the Assembly, in the district branches and state associations, and in the councils and components. Your colleagues who serve in these positions are working hard and thoughtfully and are serving you, the members, very well.

Our work continues. I was fortunate this year to have been advised and guided by former Speaker Ed Hanin as my Parliamentarian. I learned a great deal from my predecessor, Prakash Desai, who served as Speaker with grace and wisdom and who served this year as chairperson of the Rules Committee. Michael Blumenfeld, our Recorder, has kept me on track with his vigilant oversight of our proceedings. Joe Rubin served ably as our Speaker-Elect, and I know that the Assembly will flourish under his leadership in the coming year. I thank you all.

At the end of the November Assembly, our able and devoted staff liaison, Stacy De La O, left APA for employment elsewhere. The capable staff of the Department of Association Governance, under the thoughtful and intelligent leadership of its director, Margaret Dewar, rallied to make the May Assembly a success. My thanks go to Margaret for her calm and sensible guidance; to Ardell Lockerman, who staffs the Assembly administrative office; to Laurie McQueen, who staffs the Joint Reference Committee; to Yoshie Davison, who staffs the Board of Trustees; to Carol Lewis, who edits our action papers as we wordsmith them from the Assembly floor; and to Alexandra Braslavskaya, the governance assistant. All of them have made my work so much easier, and I thank them.

I wish to close by again expressing my gratitude to you all for giving me this opportunity to serve you. I look forward to serving you and the Association again in other capacities.

## Report of the Speaker-Elect

*Joseph E.V. Rubin, M.D.*

I am honored to have served as Speaker-Elect of the Assembly. It has been a privilege to work closely with Dr. James Nininger, Speaker, and also with Dr. Steven Sharfstein, our President-Elect, with whom I cochaired the Joint Reference Committee. I am looking forward to stepping into the role of Speaker and serving with Dr. Sharfstein as he becomes President.

Most of you are probably aware of the structure and function of the Assembly. With representatives from all district branches of our association, as well as certain underrepresented groups and allied organizations, the Assembly is meant to debate and represent the concerns of you, the members, and generate action papers for approval and action by the Joint Reference Committee and, ultimately, the Board of Trustees on the full range of issues facing psychiatrists today. Any APA member can propose an action paper for his or her representative to bring forward for consideration by the Assembly. Consultation from relevant components on action papers is encouraged, and Assembly members are broadly represented on APA councils and committees to facilitate the process. The Assembly meets just before each annual meeting and again each November. Additionally, the seven area councils meet at least once before each Assembly meeting.

One of the major changes that Dr. Sharfstein and I instituted this year was to move the meeting time of the Joint Reference Committee so that it meets shortly after the Assembly in November, instead of in September or October, as it used to do. The Joint Reference Committee was thus able to review Assembly actions expeditiously and forward them to the Board of Trustees in December, so that there would be no delay in bringing Assembly actions to the Board of Trustees.

This year the Assembly devoted a plenary session to the topic of access to treatment and workforce issues, and as part of that focus, the topic of my Speaker-Elect forum was "One-Payor Health Insurance: Has Its Time Come...or Gone?" Panelists included Dr. Jim Sabin, a one-payor optimist from Boston employed by Harvard-Pilgrim; Dr. Rod Muñoz, APA past President and supporter of medical savings accounts and choice of payors; and Dr. Joseph Berger, Canadian member of the Assembly and one-payor survivor. Also present were Dr. Barry Chaitin, chairperson of APA's Council on Healthcare Systems and Financing, and Dr. Jonathan Weker, representative from the Vermont district branch and co-author of "The Combined, Comprehensive Health Care Model." The discussion was lively and interesting, the hallmark of a lot of Assembly business.

The Speaker-Elect serves with the Speaker on the Finance and Budget Committee and also on the Committee on Advocacy and Litigation Funding. This committee is responsible for reviewing requests from the district branches and state associations for financial support of projects involving legislation, litigation, and advocacy. At the November Assembly, the chairperson of the committee, Dr. Jeffrey Janofsky, reported that since 2000 the Board has approved nearly \$1.4 million in advocacy grants to 22 district branches and state associations. The Committee on Advocacy and Litigation Funding also administers the Fund to Defeat Psychologist Prescribing; to date, the Board of Trustees has approved requests totaling more than \$325,000 for grants related to fighting legislation that would permit psychologists to write prescriptions.

In the coming year, I will work to keep the Assembly focused on the most pressing patient care issues that we face, and there are many. I will also continue to represent the members' needs and interests on the Board and on all the committees on which I sit, and I will continue to support our Association's fight to stop the giveaway to inadequately and unsafely trained individuals of the right to practice medicine.

I have been very fortunate to have the guidance of Margaret Dewar, director of the Department of Association Governance, and her capable staff. Laurie McQueen, the department's associate director and staff liaison to the Joint Reference Committee and the presidential appointment process, has been invaluable to Dr. Sharfstein and me in the performance of those tasks. In my years as Speaker, I look forward to working more closely with the rest of the staff of the Department of Association Governance, including Ardell Lockerman, Yoshie Davison, Carol Lewis, and Alexandra Braslavskaya.

I have always been impressed with the willingness and dedication of our Assembly members to volunteer their time and energies to work for the good of our Association, our members, and our patients. I look forward to serving as your Speaker. I invite all of you to be in touch with me and your Assembly representatives.

## Report of the Committee on Bylaws

*Derek Puddester, M.D., Chairperson*

The members of the Committee on Bylaws are Dr. Derek Puddester, chairperson, and Drs. Tanya Anderson, Robert Kimmich, Louis Moench, Ramaswamy Viswanathan, and William Wood.

This has been a quiet year for the committee. Our last task assigned by the Board of Trustees was to prepare amendments to the bylaws to designate the Medical Director, rather than the President, as the Chief Executive Officer (CEO) of the Association. To that end, the Committee on Bylaws, acting through e-mail, prepared amendments to sections 3.8 and 4.2 of the bylaws. Bylaws section 3.8 specifies that the Board selects the Medical Director. Bylaws section 4.2 specifies that the President is the CEO. The amendments designated the Medical Director as the CEO and further included language allowing the Board to specify the functions of each position.

The committee presented the proposed recommendations to the Board of Trustees at its December 2004 meeting, but the Board postponed approval of the amendments until its March 2005 meeting. President Dr. Michelle Riba appointed the Ad Hoc Work Group to Review the Roles of the President and Medical Director. The work group presented the Board with position descriptions for the President and Medical Director and proposed a slight change in the amendments previously proposed by the Committee on Bylaws.

The Board of Trustees approved these changes at its March 2005 meeting and forwarded them to the Assembly for ratification at its May 2005 meeting (the Assembly ratified the amendments on a vote by strength).

The amendments approved by the Board of Trustees in March 2005 and sent to the Assembly for ratification in May 2005 are as follows. Deletions appear in brackets, and additions are underlined.

*Section 3.8, Function and Responsibilities.* The Board shall manage the affairs of the Association and shall formulate and implement the policies of the Association. The responsibilities of the Board shall include:

(i) Selecting a Medical Director who shall be the Chief Executive Officer [function as the administrator] of the Association. [in order to carry out its purposes and resolutions]

*Section 4.2, President.* The President [shall be the chief executive officer of the Association and] shall carry out all orders and resolutions [of] as specified by the Board and the membership. The President shall preside at all general meetings of the Association, and at all meetings of the Board.

## Report of the Membership Committee

*Mary Marrocco, M.D., Chairperson*

Following are highlights of APA membership changes in 2004.

- New Medical Student Members totaled 886 for 2004, a 72% increase from the 514 new Medical Student Members in 2003.
- New and reinstating Members-in-Training totaled 1,431 for 2004, a 5% increase over the 1,366 Members-in-Training in 2003.
- New and reinstating General Members totaled 1,138 for 2004, a 19% increase over the 953 new/reinstating General Members in 2003.
- New and reinstating International Members totaled 295 for 2004, more than double the 131 new/reinstating International Members in 2003.
- Member class advancements from Medical Student to Member-in-Training totaled 71 for 2004, a 20% decrease from the 89 such advancements in 2003.
- Members-in-Training advancing to General Member status totaled 662 for 2004, a 38% decrease from the 1,065 such advancements in 2003. (The difference between the 2 years is

partially due to the number of eligible Members-in-Training needing to advance, 2,600 in the spring of 2003 versus 1,550 in the spring of 2004.)

New enrollments and reinstating dues-paying members totaled 2,929, whereas dues-paying members who were dropped or resigned totaled 1,895, for a net gain of 1,034 in 2004. This compares to a net gain of 477 members in 2003, with a total of 2,519 gains and 2,042 losses.

Membership gains for 2004 continue to be attributed to two main factors. The first is the dues amnesty program in effect for almost 2 years. The second is the malpractice insurance obtained through the Psychiatrists' Program, the APA-endorsed psychiatrists' professional liability insurance program.

The 2004 dues year was the first dues cycle in which there was no longer a 90-day grace period in which to pay one's dues. Members had to pay 2004 and prior dues by Dec. 31, 2004, or their membership was terminated. The member retention program began in September 2004 with over 4,000 members and ran through mid-January 2005, when the final drop count was 1,565. This number is 300 more than the number dropped in April 2004 for nonpayment of 2003 dues (when the 90-day grace period was in effect). Over 330 members who were dropped had paid to reinstate their membership by the end of March 2005.

Calling program information was sent to the district branch executives, Assembly members representing branches, and Board of Trustees members in November. This packet included strategies for calling members, speaking points, sample scripts, frequently asked questions and answers, and fax-back forms to report member contacts to APA. The district branches played a very critical role in the retention efforts again this year. They established calling programs, conducted e-mail and letter campaigns, and posted notices in their newsletters or on their web sites requesting members to pay dues. Several members of the Board of Trustees and the Assembly also contacted members on the drop list whom they knew personally. Additionally, about a dozen staff liaisons to APA components contacted members on their components who were on the drop list (approximately 35 members) to encourage them to renew their memberships, and most were successful in doing so.

The Centralized Membership Processing Pilot Project, designed to streamline all membership processing actions, has been operating effectively for almost 3 years now. The procedures have been revised several times to incorporate suggestions from the district branches and APA staff. The pilot program has expanded from the original six district branches to now include 58 branches. There are no plans to significantly expand the pilot project until after the new association management system is in place and staffing needs can be reassessed.

In November 2004, the Assembly approved action papers to introduce the concepts of automatic district branch transfers and automatic advancement from Member-in-Training to General Member status. Details about the two processes have been drafted in cooperation with the District Branch Advisory Corresponding Committee. The details have also been circulated among all district branch executive staff for review and feedback. Staff plans to present the Membership Committee with the procedures and district branch feedback at the May meeting. The procedures will be presented for final approval at the July 2005 Board of Trustees meeting for implementation soon thereafter.

For several years, the Membership Committee has discussed whether or not APA should offer reduced dues for retired members and, after further deliberations, recommended that two scenarios be presented to the Board of Trustees for discussion and possible action. The first scenario was approved for implementation in 2006:

- The member must be 70 years of age.
- The member must be fully retired (cannot be earning any income from the profession, including consulting work).
- The member will continue to receive all benefits.
- Dues are reduced by 50% of the member's current rate.
- The member must apply for the retired rate by contacting APA in writing. APA will forward the information to the district branch for recommendation before making any changes. If

the district branch does not respond within 2 months, APA staff will administratively adjust the APA dues. The information will be reported to the Membership Committee and the Board of Trustees for information only.

The Membership Committee suggested that APA offer rebates to new members who register as nonmembers and then apply for membership on-site during the annual meeting. If the applicant were to be approved for membership by the district branch and APA within a defined period of time, he or she would be eligible for a rebate. The rebate would be the difference between the non-member and member meeting registration rate *after* the difference was applied to the current year's membership dues. Since the dues are prorated on the basis of the date when the member joined, the most any new member would owe for dues would be for one-half of a year. In most instances, this amount would be less than the difference in the meeting registration rate, allowing the new member to receive a rebate.

The committee was pleased to learn about several new initiatives developed by staff in the Membership Department. The Council on Global Psychiatry also recently reviewed these initiatives and forwarded a motion to the committee supporting the exploration of a new category of membership for international psychiatrists-in-training. Through contacts by Dr. Pedro Ruiz, almost 7,500 International Member applications have been placed in registration packets or otherwise distributed at the congresses of the World Psychiatric Association, the Argentinean Association of Psychiatrists, and the Latin American Psychiatric Association.

The District Branch Orientation Outreach Program was created in the summer of 2004 to provide membership training to new executive directors and administrative assistants. Training is conducted in the local district branch office. Materials pertinent to district branch membership operations are provided to give the staff member an overview of all facets of processing. Training is modified according to the experience and background of the staff. The end result produces quick and accurate processing of all membership actions and provides better service to all current and new members. An APA Membership Department representative has conducted six district branch site visits in the past year, and the feedback from the branches has been positive.

Historically, APA has collected updated information about members' areas of interest, customary services provided, and work setting type when collecting information to publish in the membership directory. The last print version of the membership directory was published in 1997–1998 by Harris Publishing, an outside vendor.

Updated information from our members is needed for several reasons, including to expand the existing online membership directory so that members can use it for referrals, as well as to enhance the list-rental operations. APA staff and district branch executives were recently polled to find out if there is other information they would like to have from our members, and the responses were wide and varied. An ad hoc work group, consisting of Drs. Barry Wall (chairperson), Mary Ann Schaeffer, Margery Sved, and Ronnie Stangler, was appointed to work with staff in the Membership Department to develop and implement the survey. The ad hoc group will report back to the Membership Committee in May 2005.

The APA Board of Trustees passed a resolution supporting the 150th anniversary of St. Elizabeths Hospital in Washington, D.C. As part of APA's support for this noteworthy occasion, the Committee on History and Library proposed to the Membership Committee that APA award a posthumous Honorary Fellowship to Dorothea Lynde Dix (1802–1887) in recognition of her central role in the development of the profession of psychiatry and advocacy for humane treatment of the mentally ill.

There were 173 applications for Fellowship in 2004. Copies of the applications and letters of reference were sent to the district branches in July for the 90-day comment period. Most of the district branches that responded had positive, supportive comments on the applicants. Therefore, the Membership Committee voted that all applications for Fellowship be approved. This list included three deferred nominees for Distinguished Fellowship who were approved for Fellowship, for a total of 176 members.

In 2004 the committee received 95 nominations for Distinguished Fellowship from 33 district branches. Of these, 91 were approved, three were approved for Fellowship, and one was deferred. The committee reviewed and approved the nominations of three individuals for International Fellowship. There were 273 new Life Members and 30 new Life Fellows. There were 248 new Distinguished Life Fellows, and the total for new 50-Year Life Members/Fellows was 216.

The full report of the Membership Committee can be obtained by contacting the Membership Department at skuper@psych.org (e-mail) or 703-907-7348 (telephone).

## Report of the Committee of Tellers

*Liza H. Gold, M.D., Chairperson*

The Committee of Tellers met on Feb. 25, 2005, at APA headquarters to certify the results of the 2004 election. Present were Dr. Liza H. Gold, chairperson, Dr. Daniel Hicks, member, and Carol Lewis, APA staff; Dr. Karen Weihs of the committee was unable to participate.

Ballots were mailed on Dec. 22, 2004, to 30,641 eligible voting members. Ninety-five undeliverable ballots were deducted from that number; the adjusted number of eligible voting members was 30,546. The number of ballots included in the final tally was 10,424 (34.1% of the eligible voting members).

The Committee of Tellers confirmed that all candidates had verified the accuracy of their biographical statements and had submitted the required statements of compliance with election guidelines.

On-line voting was used for the fifth time in the 2005 election. Members for whom APA had e-mail addresses were sent on-line voting information by e-mail. Of those voting, 23.6% used the on-line ballot, an increase of 14.9% over the 8.7% who voted on-line in 2004.

The Committee of Tellers certified that the following individuals were elected to office and so reported to the Board of Trustees: President-Elect: Pedro Ruiz, M.D. (73.5%); Vice-President: Nada L. Stotland, M.D., M.P.H. (61.7%); Trustee-at-Large: David Fassler, M.D. (61.6%); Member-in-Training Trustee-Elect: Lysiane A. Ribeiro, M.D., M.P.H. (55.5%); Area 2 Trustee: Ann Marie T. Sullivan, M.D. (60.1%); and Area 5 Trustee: Mary Helen Davis, M.D. (52.9%).

On the recommendation of the Committee of Tellers, the Board of Trustees accepted the results of the 2005 election at the Board's March 6–7, 2005, meeting. The Board also approved the recommendation of the Committee of Tellers to dispose of the ballots from the 2005 election after the 2005 annual meeting.

## Report of the Elections Committee

*Yvonne B. Ferguson, M.D., Chairperson*

The Elections Committee conducted its business primarily through fax and e-mail during the 2004–2005 year. I wish to thank the committee members for their efforts and their prompt responses: Drs. William Cardasis, David Hodo, and David Wahl.

In June 2004, the Board of Trustees approved a change in the guidelines recommended by the Elections Committee to clarify that Area council and state association list serves cannot be used for campaigning. The Board also approved the committee's recommendation to reduce election costs by using nonprofit mail to mail the paper ballots, a savings of approximately \$13,000. Since the post office is allowed to hold such mailings for up to 10 days, ballots could be delayed. To offset the delay, the Elections Committee recommended changing the mail date from January 5 to December 22 and maintaining the same return date of February 7. To implement the earlier mailing date, the Elections Committee asked the Board to waive the provision in the election procedures and guidelines that states, "Ballots and accompanying materials are mailed to voting members on January 5 (or the following Monday if January 5 falls on a weekend)."

In an effort to increase on-line voting, Intelliscan, Inc., our election management firm, sent three e-mail "blasts" to members with e-mail addresses, resulting in 23.6% of those voting using the on-line ballot, an increase of 14.9% over the 8.7% who voted on-line in 2004.

The 2005 election was the smoothest election in recent history. Two sets of opposing candidates entered into private agreements that they would not send campaign letters. The Elections Committee supports such arrangements provided that they do not compromise the election process or run counter to the guidelines and provided that candidates who plan to enter into such agreements consult the committee first. The committee thanks the candidates and their supporters for their compliance with the guidelines.

The Elections Committee encountered only minor violations of campaign guidelines. There were three instances in which candidates or supporters sent campaign e-mails that did not include "APA Campaigning" in the subject line. The committee notified the senders that failure to include those words was a violation of

the guidelines and requested that the words be included in any future e-mails.

The importance of including "APA Campaigning" in the subject line was illustrated by complaints the committee received from two members about receiving campaign e-mails. The members were notified that the election guidelines permitted the sending of unlimited e-mails for campaign purposes but that the e-mails must include the words "APA Campaigning" in the subject line so that members who do not wish to receive such messages can delete them or set up filters to block them.

The Elections Committee continued to utilize its list serve for the committee members and the candidates to communicate during the election period. Candidates, committee members, and staff alike found this to be a very useful and efficient way to share information, particularly since questions could be posed and answered in a way that everyone received the same information.

The Elections Committee will meet during the annual meeting to review the 2005 election experience and discuss possible revisions to the campaign guidelines. We will make our recommendations to the Board at its July 2005 meeting.