

## Reports to the Membership

The following are edited/abbreviated versions of the annual reports of the APA Secretary, Treasurer, CEO and Medical Director, Speaker, and Speaker-Elect and the chairpersons of the APA Committee on Bylaws, Membership Committee, Committee of Tellers, and Elections Committee. The full reports were presented at the APA Virtual Annual Meeting, May 1–3, 2021.

### REPORT OF THE SECRETARY

Sandra DeJong, M.D., M.Sc.

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

#### APA Apologizes for its Support of Structural Racism in Psychiatry

The Board of Trustees developed and issued a formal apology from the APA to Black, Indigenous, and People of Color for its support of structural racism in psychiatry. The apology was published on Martin Luther King, Jr., Day, in recognition of his life's work of reconciliation and equality. The Board of Trustees invites all members to engage in the ongoing work of addressing structural racism in our organization and our profession.

#### Board of Trustees Hires Independent Consultants

The APA, like many organizations, faced unprecedented challenges in 2020, including the COVID-19 pandemic, a difficult economic climate, and a profound social reckoning with structural racism and health inequities. While such challenges can present threats to an organization, they also present opportunities to improve the organization and its governance. The Board of Trustees is committed to facing these challenges to improve its organizational leadership and has set aside funds to invest in processes that will enable the Board to respond strategically and effectively to the current challenges and ensure the APA of the future is well positioned to act in the best interest of members, patients and families, and the organization as a whole.

In August 2020, the APA Board of Trustees voted to engage a consultant to enhance the effective function of the Board and its working relationship with the CEO and APA staff. After a search, the Board hired Marc Nivet, Ed.D., M.B.A., Independent Consultant, who conducted his work from September 8, 2020, through October 8, 2020. He recommended that the Board begin by optimizing its operational processes

and retain a longer-term consultant to address issues of diversity, equity, inclusion, and structural racism. He provided 27 recommendations categorized into accountability, trust, Executive Committee, transparency, and communication, which were posted on the APA members' website.

The Board is optimistic that this Action Plan will position APA to effectively advocate for its members and the field of psychiatry to address current and future challenges.

#### Presidential Task Force to Address Structural Racism Throughout Psychiatry

In June 2020, Dr. Jeffrey Geller established the Presidential Task Force to Address Structural Racism Throughout Psychiatry. Chaired by Dr. Cheryl Wills, the Presidential Task Force was charged with 1) providing education and resources on APA's and psychiatry's history regarding structural racism; 2) explaining the current impact of structural racism on the mental health of our patients and colleagues; 3) developing achievable and actionable recommendations for change to eliminate structural racism in the APA and psychiatry now and in the future; 4) providing reports with specific recommendations for achievable actions to the APA Board of Trustees at each of its meetings through May 2021; and 5) monitoring the implementation of tasks 1 through 4.

The Task Force conducted surveys, established a webpage with resources for members and the public to learn more about structural racism, and organized Town Hall meetings. The Task Force created working groups to review the APA governance structure, election process, Fellowship program, and the Scientific Program Committee. Based on their findings, the group made suggestions to the Board, many of which the Board approved in an effort to make the organization more inclusive and to expand diversity, particularly in leadership.

#### APA Presidential Task Force on Interprofessional Collaboration

In October 2020, the Board of Trustees voted to approve the *Key Principles for Interprofessional Collaboration Among Mental Healthcare Providers in Treating Persons with Severe*

*Mental Illnesses*, developed by the 2019–2020 APA Presidential Task Force on Interprofessional Collaboration. Initiated in December 2019, the Presidential Task Force, chaired by Dr. Sandra DeJong, was charged with engaging stakeholders from mental health organizations to produce joint principles of effective collaboration to promote access to high-quality treatment for persons with serious mental illness. APA's Councils on Healthcare Systems Financing, Quality, and Advocacy, as well as the Assembly, were represented on the Task Force.

### **Presidential Task Force on the Assessment of Psychiatric Bed Needs in the United States**

Chaired by Dr. Anita Everett, this Task Force worked to research, assess, and develop recommendations regarding the current capacity of inpatient psychiatric care in the United States. The Task Force accomplished this through a series of subgroups, which 1) reviewed the historical and current context to psychiatric care; 2) assessed the current funding model and identified financial barriers; 3) identified community resources that might mitigate the need for inpatient care for the treatment of mental illness; 4) reviewed disparities and equity in accessing treatment; and 5) addressed the critical shortage to access child inpatient treatment and services. The Task Force consisted of 23 external members with a wide expertise, including three members with expertise in child and adolescent psychiatry and two members who specialize in modeling techniques. The Task Force also included six APA/APAF fellows and four members of the APA administration.

Each subgroup submitted their respective documents, which will become individual chapters to an upcoming white paper. In addition, the groups created a model that can be utilized across a community or population, which will enable the creation of an estimate for the number of psychiatric beds needed across a population of adults and children.

### **Position Statements**

The APA Board of Trustees addressed a total of 38 position statements as of March 22, 2021. Position statements can be found on the American Psychiatric Association's website: [www.psychiatry.org](http://www.psychiatry.org) (under "Policy Finder").

#### *New and Revised Position Statements.*

- Position Statement on Antiretroviral-Based Therapy for HIV Prevention
- Position Statement on Competence Evaluation and Restoration Services and the Interface with Criminal Justice and Mental Health Systems
- Position Statement on Consent to Mental Health Treatment by Guardians, Health Care Agents or other Legally Designated Surrogate Decision-making for Adults with Mental Illness
- Position Statement on HIV Risk Reduction
- Position Statement on Issues Pertaining to Capital Sentencing and the Death Penalty

- Position Statement on Issues Related to Sexual Orientation and Gender Minority Status
- Position Statement on Leadership of Academic Departments of Psychiatry
- Position Statement on Mental Health Needs of Undocumented Immigrants
- Position Statement on Pharmaceutical Marketing to Justice Entities regarding Medication Treatment for Substance Use Disorders
- Position Statement on Psychiatrist Input into the Design and Construction of Psychiatric Evaluation and Treatment Facilities
- Position Statement on Recognition and Management of Addictive Disorders and Other Mental Illnesses Multimorbid with HIV
- Position Statement on Recognition and Management of HIV-Related Neuropsychiatric Findings and Associated Impairments
- Position Statement on the Use of Antipsychotic Medication in Patients with Major Neurocognitive Disorder
- Position Statement on Treatment of Transgender (Trans) and Gender Diverse Youth
- Position Statement on Universal Health Care in the United States
- Position Statement on Voluntary and Involuntary Hospitalization of Adults with Mental Illness
- Position Statement on the Impact of Cannabis on Children and Adolescents
- Position Statement on Banning of Pharmacy Benefit Management Policies that Require the Provision of Dangerous Quantities of Medications\*
- Position Statement on Second Generation Antipsychotic Medications\*
- Position Statement on Xenophobia, Immigration, and Mental Health\*
- Position Statement on Suicide Among Black Youth in the United States
- Position Statement on Medicaid Coverage for Maternal Postpartum Care
- Position Statement on Use of the Terms Client and Provider
- Position Statement on Concerns About Use of the Term "Excited Delirium" and Appropriate Medical Management in Out-of-Hospital Contexts
- Position Statement on Growing Fear over Coronavirus Spread and Mental Health Impact in ICE Detention Centers
- Position Statement on Reducing the Burden of Treatment Plan Documentation
- Position Statement on Screening and Treatment of Mood and Anxiety Disorders During Pregnancy and Postpartum
- Position Statement on Sexual Abuse of Migrants in ICE Custody
- Position Statement on Abortion and Women's Reproductive Health Care Rights\*
- Position Statement on Ensuring Access to Psychiatric Services for the Elderly\*

- Position Statement on Involuntary Outpatient Commitment and Related Programs of Assisted Outpatient Treatment\*
- Position Statement on Medical Necessity\*
- Position Statement on Misogyny and Gender Bias and Their Adverse Effects on the Health of Women.

\*Denotes revised position statements

#### *Retired Position Statements (removed from Policy Finder).*

- Position Statement on Death Sentences for Persons with Dementia or Traumatic Brain Injury (2014)
- Position Statement on Mentally Ill Prisoners on Death Row (2014)
- Position Statement on Diminished Responsibility in Capital Sentencing (2014)
- Position Statement on Moratorium on Capital Punishment in the United States (2014)
- Position Statement on Issues Related to Homosexuality (2013)

## REPORT OF THE TREASURER

Richard F. Summers, M.D.

I am very pleased to present the Treasurer's report for Calendar Year 2020.

APA ended 2020 with a net loss of \$(1.3)M compared with a net income of \$1.6M in 2019. The results for 2020 were better than the forecasted loss of \$(2.9)M.

2020 results reflect impact of COVID-19, which had the following material effects on APA operations:

- The Annual Meeting scheduled for April was cancelled. This event was budgeted to generate \$9 million of revenue and \$4 million of profit to fund programs and services.
- Significant reductions in programs, administration, and governance were implemented, including the staff travel ban.
- Federal grant expenditures were down \$600 thousand from budget, as a large portion of expenditures center around the APA Annual Meeting.

Among our revenue-generating activities, publishing (both DSM-5 and non-DSM-5 related publishing) finished with higher net revenue than budgeted due to increase in DSM-5 book sales and growth in Psychiatry Online, aided by lower publishing expenses. However, membership dues generated lower revenues because of the impact of Rule of 95.

Expenses associated with APA Programs and Services were lower than in 2019 and below what was budgeted in 2020. Governance and Operations expenses were also lower than 2019 and lower than what was budgeted in 2020.

APA's balance sheet remains strong, with unrestricted net assets increasing by \$8.5 million over 2019. Our investment portfolio, which was initially adversely affected by COVID-19, recovered nicely over the second half of 2020. For the

year, our investment portfolio achieved a total return, net of fees, of 14.0%. This exceeded the composite benchmark of comparable investments of 12.6%. In addition, the return exceeds our investment policy statement annual return goal of CPI+5%.

In 2020, the Strategic Finance Workgroup continued the work begun last year by the Board of Trustees to look ahead and take steps to better align revenues and expense over the next several years. Working with the Board of Trustees goal of achieving a balanced budget by 2023, the Workgroup identified over \$4.2M in budgets via combination of reduced program services, administrative efficiencies, utilizing technology to reduce governance costs and implementing limited revenue increases. This is an important process that every large organization must go through periodically to reevaluate priorities, revenue opportunities, and expenses, and we are grateful for the work of Dr. Anne Sullivan and her workgroup for leading us through this process.

It has been an honor to serve as your Treasurer. My thanks to our new CFO Kevin Madden and his team, as well as my colleagues on the Board of Trustees, Finance and Budget, and other committees on which I served. Thank you very much.

## REPORT OF THE CEO AND MEDICAL DIRECTOR

Saul Levin, M.D., M.P.A.

### Section 1.01 EXECUTIVE SUMMARY

I am pleased to present the CEO and Medical Director's report, which outlines the Administration's actions, activities, and accomplishments in that period according to the APA's strategic initiatives below.

Here are executive summary items for your information:

- APA Communications surpassed 460 media calls fielded for 2020, the highest ever for a year since we have been keeping track; 16.5% of those represented top national outlets, including appearances by APA leadership on CBS Sunday Morning, in *The New York Times*, on NPR, and others. The team also helped drive growth in social media followers (28.2%) and engagements (41.8%) over the course of the year, through a mix in content that incorporated APA promotions, Communications-written blog, and other issues pertinent to mental health.

In January 2021, the team led the Martin Luther King Day roll-out of APA's Apology for its Role in Racism in Psychiatry, ensuring that the press release and the document itself were shared across all public platforms available for APA. The Apology received positive feedback and became one of APA's most popular social media posts in years and received some trade press coverage. The press release is the most viewed release in 5 years on our website, garnering more than 74,642 page-views since posting.

Meanwhile, COVID-19 and its impacts on mental health remain an important topic for journalists, and while experiencing

higher than average incoming call volume, APA set up interviews for Dr. Jeffrey Geller with Bloomberg News, ABC News, and *The Philadelphia Inquirer* early this year. And as vaccines began to reach more individuals throughout the country, APA released a statement urging that people with SMI be included in priority groups.

In March, after the tragic Atlanta mass shooting that targeted Asian Americans, CCPA worked to issue an initial APA statement the next day. APA followed up with a leadership statement in which Dr. Geller, Dr. Dora-Linda Wang, president of APA's Caucus of Asian American Psychiatrists, and Dr. Levin jointly called on psychiatrists to condemn hate against Asian Americans and shared pertinent resources for the membership.

- As the report of the Membership Committee details, APA's membership count through year-end 2020 declined 3.6% compared with the same period last year, from 38,799 to 37,420. A decline was anticipated due to issues related to the pandemic. To monitor and better understand the trend, APA is looking closely at resignation data, engaging with resigned members to gather information they are willing to share, and consulting with other medical specialty societies about their renewal efforts.
- Members of the APA Board of Trustees, APA Assembly, APA Assembly Committee on Maintenance of Certification (MOC), and MOC caucus met with the American Board of Psychiatry and Neurology (ABPN) to continue to advocate for MOC reform.
- APA Publishing: As for many businesses in the United States and around the world, 2020 proved to be a year of upheaval for APA Publishing, in all channels and in all regions, domestically and internationally. After a strong start in January and February, March through December saw the impact of the COVID-19 pandemic, and we continue to adjust. APA Publishing released 25 new books in 2020, including six textbooks and 19 professional titles. So far in 2021, APA Publishing is on pace to release another 10 books by the end of May. For more information about these and other new titles, please visit [www.appi.org](http://www.appi.org).

In addition, the APA Administration continues to implement the APA's strategic initiative objectives approved by the Board of Trustees within the organization's core areas:

1. *Advancing the integration of psychiatry* in the evolving health care delivery system through advocacy and education;
2. *Supporting research* to advance treatment and the best possible clinical care, as well as to inform credible quality standards, advocating for increased research funding;
3. *Supporting and increasing diversity* within the APA, serving the needs of evolving, diverse, underrepresented and underserved patient populations and working to end disparities in mental health care; and
4. *Educating members, patients, families, the public, and other practitioners* about mental disorders and evidence-based treatment options.

## (i) 1. Advancing the Integration of Psychiatry

### A) **APA Signature Federal Parity Legislation Passes Congress:**

Congress included APA's signature parity compliance legislation in its end-of-year package, the Consolidated Appropriations Act (CAA), as 2020 drew to a close. APA's legislation, which is now law, gives the U.S. Department of Labor (DOL) new powers to regulate ERISA plans that are found to be out of compliance with the parity law and applies those same criteria to plans in every state, whether or not they have passed our model parity legislation. Specifically, the legislation requires health plans to make available comparative analyses to DOL or a state insurance commissioner in response to complaints or if deemed appropriate. It also requires plans that DOL deems noncompliant to inform plan beneficiaries if they do not take corrective action within 45 days. The DOL will send an annual report to Congress that identifies plans that are out of compliance. APA is advocating for additional funding to implement the enforcement the law requires.

### B) **APA Supports Mental Health/Substance Use Disorder (MH/SUD) Funding in the American Rescue Plan Act of 2021:**

The APA supported several provisions important to mental health in the \$1.9 trillion coronavirus relief package, the American Rescue Plan Act of 2021, which was signed into law in March. The new law provides approximately \$4 billion in MH/SUD funding, including \$3.5 billion through the Substance Abuse and Mental Health Services Administration (SAMHSA) for MH/SUD block grants. The remaining \$500 million includes grants for education and training to promote MH/SUD treatment of frontline health care workers and funding for Certified Community Behavioral Health clinics. The law also expands the eligibility for premium assistance under the Affordable Care Act and incentives for more states to expand coverage for Medicaid. It also establishes pediatric mental health care access grants that will promote mental health integration with pediatric primary care.

- ### C) **APA Support for the Expansion of Telehealth:**
- The CAA also included a step forward to expand telehealth by permanently removing geographic and site-of-service restrictions in Medicare and allowing mental health services in a patient's home. Previously, substance use disorder and co-occurring psychiatric services were exempt from these Medicare restrictions, but not mental health alone. Unfortunately, the new provision requires an in-person evaluation within 6 months of a telehealth visit for mental health-only, which APA and other coalition partners are advocating to modify. The newly enacted long-term expansion for mental health services goes into effect after the Public Health Emergency (PHE) ends, though APA is working in coalition to extend current COVID-related flexibilities by at least one year after the PHE expires. The APA is also seeking



legislation that would make audio-only via telehealth permanent along with payment parity for these services.

- D) **APA Support for Increased SAMHSA Funding:** The end-of-year congressional package also boosted funding for several key APA priorities, including \$4.25 billion to SAMHSA in COVID-19 supplemental funding. The law also increased funding for the SAMHSA Minority Fellowship Program, Loan Repayment for the Substance Use Workforce, National Institutes of Health (NIH), and other programs. It also includes a new set-aside program that APA and the National Association of State Mental Health Program Directors championed to boost evidence-based crisis-care services in all 50 states through the Mental Health Block Grant.
- E) **APA Seeks to Address Health Equity:** The APA is advocating on several fronts to address health disparities related to MH/SUD services. The APA worked with Representatives Bonnie Watson Coleman (D-NJ) and John Katko (R-NY), as well as other stakeholders, to reintroduce H.R. 1475, the Pursuing Equity in Mental Health Act. The APA is also working with Senator Bob Menendez (D-NJ) to have the bill reintroduced in the Senate. This legislation would reauthorize and double the funding for the Minority Fellowship Program (MFP); increase funding by \$650 million per year for 5 years to the National Institute on Minority Health and Health Disparities; increase funding to NIH for data collection and clinical research to address health disparities in mental health and substance use disorders; authorize grants for education and outreach to address stigma around mental health and substance use disorders in minority communities; and provide the Department of Health and Human Services (HHS) grant authority to develop best practices around health disparities.
- F) **Medicare Physician Fee Schedule and Quality Payment Program and APA Urges the Centers for Medicare and Medicaid Services (CMS) to Permanently Cover Audio-Only Services:** In its final rule on the 2021 Medicare Physician Fee Schedule and Quality Payment program, CMS has reaffirmed the plan to finalize an increase in payments for all outpatient E/M services and to simplify documentation requirements by basing code selection solely on medical decision making or time. However, it did not increase reimbursements for psychotherapy when performed with an E/M service. APA initially successfully advocated for a 7% increase in total allowed charges; however, due to legislation (CAA) late in 2020 that increased the conversion factor above to what was originally finalized, it is now 8% for psychiatry, which in large part is due to the increase in the outpatient E/M payments. In an attempt to mitigate negative payment adjustments for other mental health professionals because of a drop in the Medicare conversion factor between 2020 and 2021, CMS increased payments for psychiatric evaluations and psychotherapy; however, it did not increase the reimbursement for psychotherapy when performed with an E/M service.
- APA has opposed the lack of parity and continues to meet with CMS. In the final rule, CMS noted that it will continue to pay for audio-only telehealth services only through the end of the public health emergency and will not make it permanent. Instead, CMS established a new telehealth code that will be used to determine the need for an in-person visit. In addition, CMS made permanent a number of telehealth provisions, such as group therapy and resident supervision, and relaxed the frequency limitations for services provided in nursing homes. APA also continues to urge the administration to support permanent coverage for audio-only services for those beneficiaries when there lacks a reasonable alternative and is medically appropriate.
- G) **APA Welcomes Biden Administration:** In a letter, APA congratulated President Joseph Biden and Vice President Kamala Harris and shared with them the unprecedented amounts of Americans dealing with mental health concerns, and thanked President Biden for being the Keynote Speaker at the 2014 Annual Meeting and discussing mental health and substance use. APA urged the administration to prioritize strengthening the ability to respond to this increased demand for psychiatric care, highlighting the potential resounding impact of untreated mental illness and substance use disorders. The letter presented several recommendations for Biden's first 100 days, including improving access to mental health and substance use treatment, making investments in the mental health system, and repealing regulations and executive orders aimed at weakening the ACA and reducing protections against discrimination.
- H) **Request for Information on Regulatory Relief to Support COVID Recovery:** APA responded to CMS's request for information regarding the regulatory changes made during the COVID-19 public health emergency. APA urged CMS to maintain a number of recently implemented telehealth flexibilities, which have been beneficial to providing care to psychiatric patients. APA also flagged some regulatory changes that could harm the overall quality of care for psychiatric patients and urged CMS to discontinue them after the PHE, specifically 1) the Office of Civil Rights' waiving the enforcement of its authority around HIPAA Privacy Rules and 2) the waiving of the general supervision requirements of nurse practitioners and physician assistants by a physician.
- I) **Effective and Innovative Approaches in Health Care in Response to COVID-19:** APA responded to a request for information from HHS to provide information on innovative approaches and best practices in health care in responses to the COVID-19 pandemic. Due to new safety limitations and the need to physically distance, the availability of telehealth and other evidence-based models of integrated care like the Collaborative Care Model were identified as strategies to safely and effectively improve access to care.

## J) **APA Opposes Changes to Part D Protected Classes:**

In the final days of the Trump Administration, CMS launched the Part D Payment Modernization Model (the “PDM Model” or the “Model”) to voluntarily test the impact of a modernized Part D program design that includes flexibilities. It would permit Part D sponsors approved for participation to treat five of the six protected classes—anticonvulsants, immunosuppressants, antidepressants, antipsychotics, and antineoplastics—as they would any other Part D drug. This could jeopardize beneficiary access to medically necessary prescription drugs and harm patients with serious illnesses such as cancer, HIV/AIDS, epilepsy, and psychiatric disorders. APA, working with other impacted organizations, has asked the Biden Administration to rescind the Trump Administration’s policy.

## (ii) 2. Supporting Research

A) **APA Mental Health Registry PsychPRO:** In preparation for the 2021 Merit-based Incentive Payment System (MIPS) reporting period, staff are updating website content and other informational material to communicate the benefits of the program as we continue to recruit participation for PsychPRO. MIPS and other regulatory reporting will continue to be an avenue for PsychPRO recruitment, along with quality improvement for large systems. Large systems can benefit from joining PsychPRO, primarily by establishing a community of leaders to impact quality measure development and performance benchmarking. It will be important for the APA and psychiatry to lead in defining quality care, especially as health care moves toward a value-based system, where reimbursement for care is tied to the quality of care provided and improved patient outcomes. For more information about the Registry, please go to [www.psychiatry.org/psychiatrists/registry](http://www.psychiatry.org/psychiatrists/registry).

B) **NIDA-Funded Initiative Addiction Medicine Practice-Based Research Network (AMNet):** We continue to build AMNet. With enhanced recruitment efforts, the number of practices participating in AMNet is growing, and the onboarding and training of these practices are in progress. An AMNet webinar, titled “Using AMNet to Track Opioid Use Disorder Treatment Outcomes,” was presented in January 2021. In February 2021, we hosted a webinar that focused on “Human Subjects Research and Methodology.” The team also worked on a March 2021 webinar that focused on “Recent Updates in Opioid Use Disorder Treatment.” A manuscript on AMNet Assessment Tools and Quality Measures was submitted for publication in the *Journal of Substance Abuse and Rehabilitation*. One more manuscript is in development that focuses on the impact of COVID-19 on the delivery of care for patients with opioid use disorder. The team recently recorded their APA Annual Meeting symposium on AMNet: Symposium #1155: Building

an Addiction Medicine Practice-Based Research-Based Network (AMNet).

## C) **Agency for Healthcare Research and Quality (AHRQ) Outcome Measure Harmonization and Data Infrastructure—CAPSTONE Grant:**

The Research and Registry teams continue to work with OMI, Inc. on the depression outcome measure harmonization and data infrastructure project. We finished data collection and analysis and submitted a final report to AHRQ.

## D) **Research Colloquium for Junior Psychiatrist Investigators:**

The 2020 Research Colloquium was held virtually on December 5, 2020, before the American College of Neuropsychopharmacology (ACNP) Annual Meeting. Thirty-two awardees participated, including seven international mentees from Argentina, Brazil, Japan, the Netherlands, Nigeria, and Mexico. Thirty-four Senior Research Mentors and 11 Statistical/Methodological Mentors from institutions across the country also participated.

## E) **APA Foundation Psychiatric Research Fellowship:**

Applications for the 2021 Psychiatric Research Fellowship are being reviewed by the Selection Committee, and notifications were sent. The Division of Research continues to meet biweekly with the two psychiatric research fellows, Drs. John Torous (2018–2020) and Alison Hwang (2019–2021) to discuss their research projects. Both Drs. Torous and Hwang are active with the Council on Research and its components.

## F) **COVID-19 Research Grant:**

The research grant, funded by the APA Foundation, supports research studies relating to the impact of COVID-19 on patients with mental illness and substance use disorders, the psychiatric workforce, and the practice of psychiatry. The seven awardees continue to meet biweekly with the Division of Research staff to receive feedback and guidance as they conduct their studies. All of the awardees have received institutional review board approval from their institutions, and they are all in the process of collecting data. Four of the seven participated in Symposium #1242, “COVID-19 and Mental Health: Vulnerable Populations and Behavior Management Strategies” at the 2021 APA Annual Meeting.

## (iii) 3. Diversity and Health Equity

### A) Division of Diversity and Health Equity (DDHE) Update:

- We successfully recruited three senior program managers and a program manager for a total of seven staff in DDHE committed to advancing APA’s new and innovative efforts to achieve diversity and mental health equity.
- In partnership with Communications, DDHE launched a monthly social media campaign (using the hashtag, #AchieveMentalHealthEquity).
- Authored an APA blog post focused on *Charting Excellence through Partnerships: strategic goals for the division of diversity and health equity*.

- DDHE hosted a webinar on April 8, 2021, to examine strategies and opportunities to improve the mental health of African Americans during the pandemic, while raising awareness and building trust on the efficacy of the COVID 19 vaccine. Panelists included Dr. Cynthia Turner-Graham (President-Elect of Black Psychiatrists of America), Dr. Kizzmekia Corbett (NIH team lead for the development of the Moderna Vaccine), and Dr. Regina James (Chief of DDHE and Deputy Medical Director) as moderator.
- DDHE, with the APA Foundation, partnered to organize the inaugural Moore Equity in Mental Health 5K in honor of mental health equity champion Bebe Moore Campbell. The run/walk/roll event occurred on Saturday, July 10, 2021, during Black, Indigenous and People of Color (BIPOC) Mental Health Awareness Month and raised over \$85K with over 500 participants. The goal of this event is to raise awareness and funds for initiatives that address mental health and substance use disorder inequities experienced by BIPOC youths.
- Contributed to the APA's 117th Legislative Priorities document put forth by Government Relations.
- Supported the APA Presidential Task Force on Structural Racism Throughout Psychiatry by 1) providing a staff liaison to the Resources Workgroup, 2) developing the postsurvey for the fourth Town Hall, and 3) developing the fourth survey to be distributed to APA members.
- Engaged members in a discussion focused on diversity and health equity by presenting to the North Carolina Psychiatric Association and the Brooklyn Psychiatric Society.
- Engaged APA Minority/Underrepresented Representative Caucus Members and the Council on Minority Mental Health and Health Disparities by convening a conversation around *Charting Excellence through Partnerships: strategic goals for the division of diversity and health equity*.
- Working with the Division of Research to support Advancing Gender Equality in Psychiatry (Action Paper).
- Providing diversity and health equity support to the Division of Education's SAMHSA Centers of Excellence for Behavioral Health Disparities subaward.
- Division Chief and Deputy Medical Director providing leadership and mentorship to APA's SAMHSA Minority Fellowship Programs as the Project Director on the grant award.

#### (iv) 4. Education and Annual Meeting

- 2021 APA OnDemand:** Over 400 scientific sessions were selected by the Scientific Program Committee and invited by the APA President for inclusion in the APA OnDemand Product. Recording of these sessions was completed with the OnDemand player released in May.
- 2021 APA Annual Meeting online:** The program for the 2021 Annual Meeting was confirmed and scheduled, including 135 scientific sessions and 1,294 posters. The scientific sessions were available for viewing in advance

of the meeting in the online session search tool.

Three keynote speakers were confirmed for the meeting: Isabel Wilkerson (Opening Session: Saturday, May 1); Anthony Fauci, M.D. (Convocation: Sunday, May 2); and Robert Sapolsky, M.D. (Closing Session: Monday, May 3).

More than 6,500 unique users accessed the site during the meeting. On the meeting home page, the scientific program received 32,000+ clicks, 150% more than any other component.

- APA Learning Center** (<http://education.psychiatry.org>): APA issued 206,886 CME/CE credits through its learning management system in 2020 to 37,721 learners.
- 2021 APA Mental Health Services Conference (formerly known as IPS):** Initial plans are under way for hosting a virtual meeting in the Fall of 2021 using the meeting format approved by the Board of Trustees in early 2020.
- FOCUS Journal of Lifelong Learning:** The winter 2021 issue of *FOCUS* centered on psychopharmacology. *FOCUS* currently has 1,938 individual and institutional subscribers.
- Grant Partnerships:** APA has been selected as a subawardee on a number of new SAMHSA training and technical assistance grants. Since January 1, 2021, APA has formalized educational partnerships with the American Academy of Addiction Psychiatry, Morehouse School of Medicine, and the University of Oklahoma on projects related to the opioid crisis, behavioral health disparities that impact Black Americans, and suicide prevention.
- Joint Sponsorship Programs:** Fifty-nine organizations have been approved to participate in APA's Joint Sponsorship Program, which allows them to obtain CME credit for their meetings. APA staff has been providing technical assistance and guidance to district branches (DBs) and other organizations within the program to help them transition to online virtual meeting formats.

Finally, a few closing thoughts as we mark a year since the pandemic:

Starting on March 13, 2020, all staff were informed that due to the COVID-19 pandemic, we were to telework for the foreseeable future. As we held this APA Annual Business meeting virtually, I commended the staff for their dedication, resilience, and working as if they were in the office for over a year. Many of our members did not even realize we were working at home, because our staff seamlessly delivered the services that each member values when they renew their membership. Additionally, we also owe a debt of gratitude to the Administrative Services and Finance staff, who on a rotating schedule did go into the office to ensure that our property was protected, and essential mail went out.

While the pandemic is not over, with vaccines and personal protection equipment, as well as social distancing, we hope that 2021 will end with a return, or a beginning in the "new normal" working environment.

A special thanks also to the Board of Trustees, Assembly, Components, other leaders, and volunteer members, who serve as the backbone of our Association.

And finally, a moment of appreciation for the frontline psychiatrists, from medical students to residents to faculty, and to those who changed their practices to telepsychiatry to ensure that their patients could continue with their treatment. In this moment, more than ever, you showed that we are physicians alongside our house of medicine colleagues. We mourn those we lost to COVID-19.

With the pandemic in the backdrop, we also undertook a historic and overdue reckoning with structural racism this year within our field and organization. Much remains to be done in our journey. But I am heartened by the efforts of so many of our leadership, our members, and our Administration as we look toward an antiracist, equitable future for our profession and our patients.

We are all in this together. Let us look to the future and the continuation of the work of our oldest national medical society, our APA.

## REPORT OF THE SPEAKER-ELECT/ACTING SPEAKER

Mary Jo Fitz-Gerald, M.D., M.B.A., DLFAPA, F.A.C.P., F.A.C.L.P.

Joseph Napoli, M.D., began his term as Speaker after the first virtual annual APA meeting in May 2020. A few weeks later, Dr. Napoli sent an e-mail to the Assembly announcing that he had a glioblastoma but intended to complete his term. Appropriately enough, Dr. Napoli had chosen as his theme for the Assembly: Resilience. The past year has been a true testament to resilience. As Speaker-Elect, I have been completing his duties as Speaker.

The following includes highlights of the year. Links shown below may require APA membership log in.

### Activities

Duties of the Speaker-Elect include attendance as an Alternate Delegate to the American Medical Association meetings, the Joint Reference Committee (JRC) meetings, Assembly Executive Committee meetings, and Board of Trustee meetings. As Acting Speaker, I participated in the Executive Committee meetings. Dr. Geller, APA President, appointed me to the Presidential Task Force on Structural Racism, where I represented the Assembly. The APA State Advocacy meeting, where I served as a panel moderator, was a success for all who participated.

### Highlights

**COVID.** One of the first decisions of the Board of Trustees was whether to hold the Annual Meeting in 2021 as scheduled. The Board of Trustees decided that all meetings through November 2021 would be virtual due to the threat of COVID. The APA continues to be at the forefront of urging protective measures for our patients: *Psych News Alert*: “APA Calls on Public Health Officials to Ensure Vaccine Access to People With SMI, SUDs”.

**Structural racism.** President Geller initiated a Presidential Task Force on Structural Racism to look at the issues and suggest changes: Structural Racism Task Force (psychiatry.org). The Task Force, chaired by Cheryl Wills, M.D., was an educational experience for me. I participated in the subcommittee to recommend changes in the Assembly. The AEC met several times to discuss the recommendations and suggest changes to broaden diversity, equity, and inclusion. On MLK day, the APA issued an apology for the long history of structural racism: APA Apologizes for Its Support of Racism in Psychiatry.

**Politics. At the federal level,** highlights from the 116th Congress include enactment of APA’s signature mental health parity compliance legislation, liberalized access to telehealth during the pandemic, and significant COVID relief funding and increases in annual funding for the Minority Fellowship Program, Crisis services, and other areas. APA triumphed in the defeat of HR 884 and S2772, which would have defined psychologists as physicians under Medicare. APA also fought for increased reimbursement for outpatient E/M services.

**At the state level last year,** the State Team kept DBs in all 50 states on top of the many temporary changes states made due to COVID-19. APA created model legislation to permanently extend new telehealth flexibilities beyond the end of the public health emergency.

In 2021, after 26 DBs requested model legislation, a great number of these and related telehealth bills are moving through state legislatures. During 2020 and 2021, states have continued to enact APA’s model parity legislation, the most recent state being Kentucky. After California’s enactment last year of medical necessity criteria legislation based on the Wit decision, APA developed a 50-state model legislation based on the decision. Oregon appears poised to be the first state to enact it.

Someone once said, “Politics makes strange bedfellows.” The Political Action Committee (PAC) does not make contributions based on support or lack of support on any single issue and feels that it is important to support legislators with opposing views on some issues. However, based on events after the election, Dr. Levin sent the following e-mail to the governance bodies, including the Assembly:

*“In light of the insurrection that occurred on January 6 at the U.S. Capitol and the votes taken by some members of Congress to subvert the results of November’s presidential election, the APAPAC Board voted today to suspend contributions to those lawmakers who voted to undermine our democracy.”*

APAPAC is supported solely by APA member and staff contributions to help further APA’s advocacy agenda at the federal level in a democratic system. The APAPAC Board feels strongly that this decision is an important step to take to protect our political system and the confidence of the psychiatrists who make their voices heard through APAPAC. The decision to suspend contributions to 147 Republican members of Congress—139 in the House, and 8 in the Senate was not taken lightly, and will affect some members of Congress on whom psychiatry has previously relied for support. But this is a unique moment in our history and an issue of fundamental



importance to the democratic system of to the cascade name to on which we and our patients rely. APAPAC will continue to support legislators and candidates in both political parties who will work with us to fight for psychiatry and our patients.”

The decision was based on the undermining of democracy and the feeling that without democracy, there is no political system for the PAC to operate within. The PAC will continue to support legislators who support issues of concern to the APA.

Please consider supporting the PAC, APAPAC ([psychiatry.org](http://psychiatry.org)).

**Budget.** The Assembly faced the need to decrease the budget. The Assembly Work Group on Strategic Planning and Finances developed a proposal for the decrease. The November Assembly meeting and the February AEC meeting became virtual for the near future with the intent to continue the two Area Council meetings a year. This means that the next in-person Assembly meeting is in May 2022 after having four virtual meetings. Though the Assembly continues to be active, we certainly miss the opportunity to discuss the issues without a screen between us.

**MOC.** The Board of Trustees spent the first section of the March meeting examining the issue of MOC. Dr. Gorrindo, Deputy Medical Director and Chief of the Division of Education, presented several options about the role of APA and the ABPN and MOC. He presented both pros and cons of each position to the group. The Board of Trustees approved the following:

- The Board of Trustees voted to continue the creation of MOC products so that members who choose to participate in MOC will have access to high-quality, relevant, and low-cost MOC products.
- Board of Trustees voted to acknowledge NBPAS as an alternative to ABPN's MOC program and will provide information about NBPAS on its website. NBPAS is recognized at far fewer hospitals than ABPN certification but is an alternative for some psychiatrists. APA will make members aware of this and other potential limitations of holding only NBPAS certification.
- The Board of Trustees voted that APA publicize to APA membership, and bring to the attention of the ABPN leadership, results of the APA survey of member reactions to ABPN MOC, areas of APA member dissatisfaction with MOC, and, on behalf of our members, ask ABPN to respond to these concerns.
- The Board of Trustees voted to approve that APA work with ABPN to develop a society-based alternative to ABPN's MOC program. If accepted by ABPN, this would allow APA to develop an MOC program that would be administered by the APA and be fully recognized by ABPN for meeting MOC requirements.
- The Board of Trustees voted to approve a feasibility study of what would be involved in APA developing its own certification and MOC programs, separate from ABPN and

NBPAS. This study will include an examination of financial, legal, and ethical aspects of establishing its own certification board.

- In order to support the continued development of MOC products for members and to support the PsychPRO registry, the Board of Trustees voted to accept \$2,000,000 in unrestricted educational grants from ABPN. These grant funds will be used for the benefit of APA members. A similar unrestricted grant was awarded to the American Academy of Neurology (AAN) for this same purpose. These funds will be used to create new and low-cost MOC products that will support APA members who choose to participate in MOC to meet program requirements and continue to support the APA PsychPro Registry. This decision is consistent with the acceptance of previous unrestricted grants from ABPN in 2016, 2018, and 2020. The Board opined that the potential benefits to members were significant and that voting to take these unrestricted grant funds was in the best interest of APA members who participate in MOC. The acceptance of these grant funds will not dampen or interfere with the several ongoing activities and negotiations to improve the ABPN MOC process or to create and recognize alternative professional boarding processes. These funds are accepted as an unrestricted educational grant from the ABPN to the APA, and as such, once granted to the APA, cannot be influenced by the ABPN.

**APA Governance.** The Board of Trustees engaged Marc Nivet, Ph.D. for an initial consultation. As a follow-up, Cathy Trowar, Ph.D., continues to act as a consultant to the Board of Trustees in order to improve functioning and structure. Dr. Nivet's report can be found in the Governance section archive of the members' website with the search term “Nivet.”

I am sure all of you will agree that it has been an interesting year, but not one that we want to repeat. Thank you for allowing me to serve as Acting Speaker/Speaker-Elect. Please remember that the Assembly represents you, the members. If you have an idea for an Action Paper or an issue you'd like the APA to address, please contact your Assembly representative. We do make a difference. APA listens.

## REPORT OF THE ASSEMBLY RECORDER/ACTING SPEAKER-ELECT

Adam Nelson, M.D., DFAPA

Well, 2020–2021 has been “one for the books,” as they say. And frankly, I want to peek at the last page to find out how this one ends. I want to thank the representatives of the Assembly for electing me to be your Recorder of the Assembly this past year. Ordinarily, the Recorder would not present a written report for the Assembly, as the minutes of the previous Assembly meeting would serve as the Recorder's report. This year, however, has been an unusual one for me

personally, as I was also tasked by the AEC to serve as Acting Speaker-Elect since August, while Mary Jo Fitz-Gerald, Speaker-Elect, has stepped up to serve as Acting Speaker of the Assembly due to the illness and recent passing of our rightfully elected Speaker, Joseph Napoli, whom we will miss dearly.

“What a long, strange trip it’s been!” —The Grateful Dead

Who would have thought I would be channeling Jerry Garcia & company in a pandemic? Yet as I near the end of my term as Recorder, finishing up my role as Acting Speaker-Elect, I could not think of anything more apropos to this past year to express what I am certain many of us are feeling. Ironically, while for me that long trip lately would typically extend from my bedroom to my office in my house, it also stops well short of our twice-annual gatherings of the Assembly, which I dearly miss. In 2018, our own Vincenzo Di Nicola published his “Slow Thought Manifesto.” In it, he references “Emmanuel Levinas, a Lithuanian Jew who survived the Holocaust in France, [who] insisted that being human is a face-to-face encounter, where the ethics of how we treat each other comes first and trumps everything else.” I have now spent a year connected with my extended family, my friends, and all of you, my colleagues, in the absence of “face-to-face encounter” other than the images on my telephone or computer screen and text messages. I cannot help but feel this absence has had a subtle, yet profound impact on our entire social being, our interpersonal discourse, and the governing of our organization, as well as our practice of psychiatry. Let us continue to hope and pray for a swift end to this journey and return to “face-to-face encounter.”

### Activities: Summary of Online Meetings I Attended as Recorder/Acting Speaker-Elect

- Assembly Executive Committee—July 25, 2020; Dec. 17, 2020; Jan. 13, 2021; Feb. 6, 2021
- Joint Reference Committee—June 1, 2020; Sept. 21, 2020; Oct. 19, 2020; Feb. 8, 2021
- APA Board of Trustees—Aug. 11, Aug. 21, Aug. 23, Sept. 3, Sept. 9, Sept. 23, Oct. 3–4, Nov. 17, Nov. 21, Nov. 24, Dec. 2, Dec. 7, Dec. 12–13, 2020; Jan. 12, Feb. 9, March 12–13, 2021
- Assembly Strategic Planning and Finance Task Force—July 14 and July 22, 2020
- California Psychiatric Association—Aug. 30, 2020
- Assembly Executive Committee—Dec. 17, 2020; Jan. 13, Feb. 6, 2021
- Area Councils—Area 1 (Sep. 12, 2020; Feb. 1, 2021); Area 3 (Jan. 24, 2021); Area 4 (Feb. 1, 2021); Area 5 (March 8, March 20, 2021); Area 6 (Aug. 24, Sep. 19, 2020; Jan. 25, 2021); Area 7 (March 21, 2021)

### Highlights of My Tenure as Acting Speaker-Elect

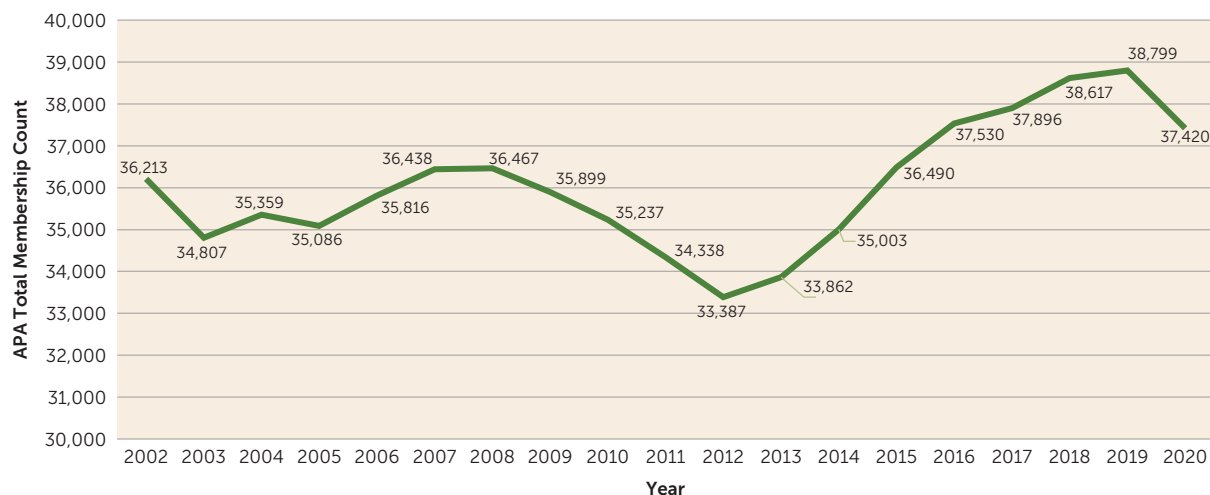
*Structural racism in the APA.* As Acting Speaker-Elect, I have the privilege to represent the Assembly, along with Dr. Fitz-Gerald, as an ex officio member of the APA Board of Trustees. As anyone who has been following discussions on the ASM

listserv can attest, racism continues to be an active topic of discussion. On MLK Day, the Board of Trustees released a public apology for what APA President Jeffrey Geller acknowledged in a series of articles as a history of systemically racist policies and practices within the APA and within the field of psychiatry nationally. In addition, the Presidential Task Force on Racism presented the Assembly with several recommendations, which the AEC has developed into a plan to increase diversity of participation, representation, and leadership in the Assembly.

*Re-examining Governance of APA.* Early in 2020, the Board of Trustees was “called out” in a series of missives for, among other things, a lack of transparency and inclusion in its actions and decisions regarding the governance of the APA. Since then, and in response to these concerns, the Board of Trustees has been reexamining its own governing practices. The Board hired Marc Nivet, Ed.D., M.B.A., to come up with recommendations, which have been published on the APA website and in the APA *Psychiatric News*. Among those was to hire a coaching consultant for the Board of Trustees and another for the CEO, both of which are now in place and working to reform many outdated and antiquated practices. Already, there are some early indications of improved communication and greater transparency between the Board of Trustees and the Assembly. The culture to facilitate change is already taking shape. However, it should also come as no surprise that these changes will be slow to occur, perhaps years. More to follow.

*APA and ABPN.* In preparing my comments for this report, I perused the reports of past Speakers and Speakers-Elect of the Assembly in AJP. The issue of MOC has probably surfaced as much if not more than any other issue with which the Assembly has grappled over the past 11 years. The issue over MOC reform remains highly contentious among APA members, according to a recent membership poll. The Board of Trustees continues to explore solutions and alternatives to MOC administered by the ABPN. Some Assembly and APA members have felt the decision to accept unrestricted grants from ABPN has created “poor optics” for APA. In accepting the grants, the Board expects the money to be put to good use to support educational initiatives, including, hopefully, alternative pathways to MOC, as well as APA’s PsychPRO Registry. APA continues to advocate for MOC reform. The matter is by no means resolved.

*COVID-19.* As a result of the global pandemic, the APA canceled its Annual Meeting and other business meetings in 2020, including the Assembly, which ended up having an abbreviated virtual plenary for 90 minutes in April. The Board of Trustees has also decided that all APA meetings until December 2021 will be virtual. This includes the Assembly, Area Councils, Components, as well as the Annual Meeting and the Fall Institute Meeting. The November 2020 Assembly meeting was our first full effort at reorganizing in a virtual meeting space, and feedback from Assembly members has



been incorporated into planning for the April 2021 meeting. Further feedback from the April 2021 meeting will hopefully further contribute to improvements for the November 2021 meeting and beyond.

**Assembly budget.** Due to consequent revenue losses, the Board of Trustees has voted to make significant budget cuts across all Governance groups, including the Assembly. The Assembly Work Group on Strategic Planning and Finances, chaired by Paul O'Leary, recommended, and the AEC approved, changes that would allow the Assembly to continue meeting in person every spring, while changing to a virtual platform every November from now on. This would preserve enough money for Area Councils to also meet in person at least once a year.

**JRC.** The JRC met three times this past year and reviewed a total of 16 Action Papers passed in the April and November Assembly meetings. In addition, the JRC reviewed several Position Statements for retirement, reinstatement, or recommended for new approval. The disposition of these Position Statements has been referred to the Assembly and to the Board of Trustees for their respective votes. A perennial complaint over the years has been problematic follow up by the JRC on actions taken by the Assembly. Over the past several years, my predecessors in the office of the Recorder have made great strides to remedy this problem, though concerns continue to be voiced (the familiar "black hole"). In March, a survey was sent out to all Assembly members to present their experiences on the disposition of action items from the Assembly by the JRC. The deadline to complete the survey is the close of business of the Assembly in April. Further modifications and improvements will be developed. The JRC will be meeting again in June to take up the action items from the April Assembly and a report will follow.

It has been my pleasure to serve as your Recorder and Acting Speaker-Elect. I look forward to having the opportunity to serve as your Speaker-Elect in the coming year. Everyone please stay safe and be well.

## REPORT OF THE COMMITTEE ON BYLAWS

Kimberly D. Nordstrom, M.D., J.D., Chairperson

*Members: Esperanza Diaz, M.D., Robert E. Kelly, Jr., M.D., Roger Peele, M.D., Rudra Prakash, M.D., John P.D. Shemo, M.D., Jonathan Charles Uecker, M.D.; APA Administration: Monique E.M. Morman, CMP, Chiharu Tobita.*

In 2020, the APA bylaws have not been altered, amended, or repealed.

## REPORT OF THE MEMBERSHIP COMMITTEE

Article II. Eric R. Williams, M.D., DFAPA, Chairperson

### Membership Summary

Total membership was 37,420 at the end of 2020, a decline of 3.6 percentage points over 2019. This decline is primarily due to the impact of COVID-19 around the world. Additionally, the strength of the dollar has likely contributed to the decline in both renewals and new member acquisition outside the United States (see Figure 1).

### 2021 Renewal Efforts

Renewal efforts began in early October with an e-mail encouraging members to renew by the December 31, 2020, deadline. Those who did not renew by this date entered a grace period ending on March 31, 2021. Per the Operation's Manual, any dues-paying member who fails to pay dues by March 31st will forfeit his/her membership effective April 1st.

The number of retention efforts increased over last year and have included the following:

- E-mail: From early October through March 31st, members received/will receive a series of segmented e-mails encouraging renewal. Overall, e-mail open rates increased by 2.4 percentage points so far this year, but click-through rates declined by 2.2 percentage points.
- Mail: Members in the United States and Canada not on a scheduled payment plan received three mailed invoices

**TABLE 1. Qualifying Programs and Residents**

Year	Number of Qualifying Programs	Number of Residents
2016–2017	104	2,356
2017–2018	104	2,399
2018–2019	118	2,710
2019–2020	130	3,128
<b>2020–2021</b>	<b>137</b>	<b>3,232</b>

prior to the March 31st drop date, with a fourth after the drop date. Members outside the U.S. and Canada were mailed a renewal notice in December, and members on scheduled payment plans received a reminder notice by mail in November.

- *AJP*: Members at risk of being dropped received a cover tip encouraging renewal on their November, December, and March issues of *AJP*.
- **APA Calling Campaign**: In mid-February, APA conducted its annual calling campaign to all members at risk of not renewing, with a follow-up call in April.
- **Digital and Social Media Advertising**: Google, Instagram, and Facebook advertising campaigns launched in November 2020. Ads were updated to be more reflective of virtual environments versus previous years depicting many people around a table. Facebook's "slideshow" feature, which enabled the use of dynamic ads, was used for the first time and has performed better than static ads.
- **Exhibiting**: APA will not be attending any in-person conferences throughout this renewal period but had a virtual presence at AACAP in fall 2020 and will continue to promote membership at the virtual APA Central at the Annual Meeting, April 30th–May 3rd.

### Promoting Member Products and Benefits

In 2020, members received regular communications that promoted the value of membership by reminding them of existing and new benefits and services, including:

1. The Course of the Month program, with a special additional course just for Resident-Fellows. The most downloaded course was *Medical Cannabis: What Every Psychiatrist Should Know*, followed by *Psychopharmacology Algorithm for Obsessive-Compulsive Disorder*. All courses were promoted using e-mail and social media to generate additional awareness.
2. Three webinars with our partners at HCA for Resident-Fellows on contract negotiations.
3. The 2019 Resident-Fellow Census was released in the fall of 2020, in partnership with AADPRT.
4. ECPs' free online *Focus* subscription.
5. Affinity program partnership in quarterly e-mails.
6. Ongoing partnership with ProjectN95 to offer premium pricing for members on PPE in August, September, and December, which will now be offered year-round. COVID

testing options will be added to the options beginning spring 2021.

7. Frequent promotion of APA's COVID-19 resources page.
8. Ongoing communication about the work of the Structural Racism Task Force, including all webinars.
9. Work with PsychSign to administer and promote their first virtual conference for medical students.
10. Continued development and promotion of resources by the Membership Committee to ease the transition from residency to early-career psychiatry. This work is ongoing and will also be done in collaboration with DBs.

If you are not receiving your Course of the Month or other communications, please login to [my.psychiatry.org](http://my.psychiatry.org) and select Communications Preferences, or contact [membership@psych.org](mailto:membership@psych.org) for assistance.

### RFMs and 100% Club

There was a 5% year-over-year increase in the number of residency programs participating in the 100% club and a 3% increase in the number of residents training in 100% Club programs in 2020 (Table 1).

Throughout 2021, we will continue to work closely with the DBs to 1) increase awareness of the new benefits of the 100% Club among nonparticipating programs, 2) encourage more programs to take advantage of institutional billing to streamline the onboarding and renewal of resident members, and 3) promote the value of membership so that members maintain their relationship and membership with APA once they complete residency.

### How Members Can Participate

Our psychiatric community grows stronger as our members are more active and engaged. Here are five easy ways you can participate in the APA membership strategy:

1. **Complete your APA profile.** Let us know about your interests and practice to help us better serve you with resources and benefits that are relevant to your daily life and practice. Log in to update or complete your profile at [my.psychiatry.org](http://my.psychiatry.org).
2. **Participate in grassroots advocacy.** Participating in national calls to action and working with your DB to visit and build relationships with your local legislators are essential to ensuring that psychiatry has a seat at the policy-making table. Learn more about APA advocacy efforts and issues at [Psychiatry.org/advocacy](http://Psychiatry.org/advocacy).
3. **Converse with your colleagues.** The Member Outreach Toolkit equips you with talking points to have meaningful conversations with your colleagues about APA membership. Access the toolkit at <http://apapsy.ch/outreach>.
4. **Stay in touch.** We want and need to hear from members to ensure we are building value that is relevant and important to your daily practice. Contact us any time with your feedback at [membership@psych.org](mailto:membership@psych.org).



TABLE 2. Results of the 2021 APA Election as certified by the Committee of Tellers

<b>President-Elect</b>	<b>Rebecca W. Brendel, M.D., J.D.</b>	<b>3,364 (60.6%)</b>		
	Jacqueline Maus Feldman, M.D.	2,191 (39.4%)		
<b>Secretary</b>	<b>Sandra M. DeJong, M.D., M.Sc.</b>	<b>2,928 (53.9%)</b>		
	Rahn K. Bailey, M.D.	2,508 (46.1%)		
<b>Early Career Psychiatrist (ECP) Trustee*</b>	<b>Elie G. Aoun, M.D., MRO</b>	<b>1,696 (32.3%)</b>	<b>1,916 (36.9%)</b>	<b>2,530 (50.1%)</b>
	Tanuja Gandhi, M.D.	1,462 (27.9%)	1,755 (33.8%)	2,522 (49.9%)
	Krysti (Lan Chi) Vo, M.D.	1,305 (24.9%)	1,525 (29.3%)	
	Chandan Khandai, M.D., M.S.	786 (15.0%)		
<b>Minority/Underrepresented Representative (M/UR) Trustee</b>	<b>Felix Torres, M.D., M.B.A.</b>	<b>3,192 (62.2%)</b>		
	Oscar E. Perez, M.D.	1,941 (37.8%)		
<b>Resident-Fellow Member Trustee-Elect (RFMTE)<sup>a</sup></b>	<b>Urooj Yazdani, M.D.</b>	<b>224 (41.8%)</b>	<b>297 (56.8%)</b>	
	Souparno Mitra, M.D.	165 (30.8%)	226 (43.2%)	
	Lindsay M. Poplinski, D.O.	147 (27.4%)		
<b>Area 1 Trustee</b>	<b>Eric M. Plakun, M.D.</b>	<b>419 (55.9%)</b>		
	Maureen Sayres Van Niel, M.D.	330 (44.1%)		
<b>Area 4 Trustee</b>	<b>Cheryl D. Wills, M.D.</b>	<b>487 (58.7%)</b>		
	Theadia L. Carey, M.D., M.S.	342 (41.3%)		
<b>Area 7 Trustee</b>	<b>Mary Hasbah Roessel, M.D.</b>	<b>306 (63.0%)</b>		
	Annette M. Matthews, M.D.	180 (37.0%)		

<sup>a</sup> Majority vote (>50%) is necessary in a contest with more than two candidates. If a majority does not exist after tallying all first-choice votes, voters' second-choice votes for the candidate with the least amount of first-choice votes are tallied and added to the remaining candidates' tallies.

5. **Get involved.** For members who want to take a more active role in APA, there are a variety of ways to do so, including consideration of leadership roles in a variety of caucuses and listservs, committee participation, contributing articles to *Psychiatric News*, etc. Need help getting started? Contact us at [membership@psych.org](mailto:membership@psych.org).

### Supporting DBs and State Associations (SAs)

For DBs on centralized billing (70), the APA Membership Department provides the following support:

- Develops, funds, and executes the full promotional schedule for membership renewal (postal mail, e-mail, digital advertising, telemarketing)
- Collects dues
- Remits dues payments and monthly reports
- Completes transfers between DBs when members move
- Pays all credit card transaction fees for DBs/SAs for member renewal and acquisition transactions
- Conducts ongoing lead generation, recruitment, and engagement campaigns via e-mail, social media, and in *AJP* throughout the year via a dedicated APA membership marketing team
- Provides dedicated APA staff to coordinate with DBs to manage membership processing and troubleshoot member inquiries.

Additional support is provided to all DBs across most APA divisions and departments, including the following:

- Conducting webinars and videos to train DBs to use APA membership processing technology and reports
- Coordinating in-person, at the APA Annual Meeting, and online orientation for DB/SA presidents
- Coordinating two calls annually between DB/SA presidents and executives with the APA President and APA Administration

- Supporting DB government relations activities through regional directors
- Coordinating monthly videoconferences between DB executives and the APA CEO and Medical Director
- Coordinating the CME application process for DB meetings.

The Membership Committee looks forward to another year working toward continued growth and collaboration across the Association.

### REPORT OF THE COMMITTEE OF TELLERS

Josepha A. Cheong, M.D., Chairperson

*Members: Mariam F. Aboukar, M.D., Aatif Mansoor, M.D.; APA Administration: Monique E.M. Morman, CMP, Chiharu Tobita.*

At its March meeting, the Board of Trustees approved the following results of the 2021 APA Election as certified by the Committee of Tellers (Table 2):

The 2021 APA Election polls opened on January 4, 2021, and closed on February 1, 2021. The Survey & Ballot Systems, Inc. (SBS) managed the distribution and tallying of ballots while providing technical support to voting members. Voter turnout for the 2021 Election was 19.39%, with 5,745 of 29,632 eligible voting members participating, and has been the highest among the past three election cycles.

Traditionally, eligible voting members received either an electronic or a paper ballot. Voting members with e-mails listed in the membership database received an electronic ballot on January 4, 2021, while voting members without e-mails or with invalid e-mails received a paper ballot postmarked January 4. As an alternative voting method, eligible voting members were also able to access their ballot through the APA Election website by entering their [psychiatry.org](http://psychiatry.org) username and password.

In the 2021 Election, there was a total of 219 returned paper ballots postmarked February 1. Furthermore, the number of paper ballot returns decreased steadily over the past 5 years, from 10% in 2016 to 3.8% in 2021.

Effective with the 2022 election cycle, voting in the APA national elections will be conducted electronically, and paper ballots will only be available upon request. All voting members who would normally receive paper ballots in 2022 will be notified of this change via mail.

## REPORT OF THE ELECTIONS COMMITTEE

Justin W. Schoen, M.D., Chairperson

*Members: John F. Chaves, M.D., O'Ann Karin Fredstrom, M.D., Jeffrey L. Metzner, M.D.; APA Administration: Monique E.M. Morman, CMP, Chiharu Tobita*

The 2021 APA election began with the announcement of candidates on October 21, 2020. Based on the revised nomination process, candidates were announced earlier this year once approved by the Board of Trustees. There was a total of 19 candidates for President-Elect, Secretary, Early-Career Psychiatrist (ECP) Trustee, Minority/Underrepresented Representative (M/UR) Trustee, Area 1, 4, and 7 Trustees, and Resident-Fellow Member Trustee-Elect (RFMTE). The candidates for Area 4 Trustee were announced on November 2, 2020.

A large number of violations of the *APA Election Guidelines* were reported during the course of the 2021 election campaign period between October and January. The Committee addressed a total of 11 campaign violations, which were addressed and resolved by the Committee.

**Violations of the APA listserv Guideline:** Section B. 3.b. Listservs: "The APA Member-to-Member listserv may be used for campaigning, but no other APA listservs used for APA, Area Council/State Association, or District Branch functions."

**Violations of Endorsement Policy:** Section B.1.: "National Nominating, Elections and Tellers Committee, as well as the Board of Trustees, are not permitted to participate in campaigning, and endorse/support a candidacy."

**Violations of Collegiality Principle:** "An atmosphere of collegiality should be promoted among candidates and among members, fostering the fellowship spirit, a more open communication and exercise of professionalism that would ensure focus on issues and fair play."

During its December 2020 meeting, the Board of Trustees approved the following action by the APA Presidential Task Force to Address Structural Racism Throughout Psychiatry:

*"That the rules for nationally elected APA positions be modified to PROHIBIT ALL CAMPAIGNING except through APA-sponsored activities, including the APA Election website with bios and videos, any special events APA might arrange (like an Election Town Hall), and any other activities or*

*venues as the APA Elections Committee may direct or permit."*

In January and February 2021, the Elections Committee carefully reviewed and evaluated the APA election process, campaign violations, and candidate/member feedback to seek opportunities for improvements and to establish and ensure new procedures for equitable voting of the membership and for an overall clear, inclusive, and transparent process for all members.

The recommendations were carefully developed and considered by the Elections Committee based on:

1. Questionnaire responses received by the CEOs of 16 external organizations about their practice of election and campaign activities; and
2. Survey responses received by 79 candidates of 2016–2021 elections

On March 13th, the Elections Committee presented its report to the Board of Trustees. Below is a summary of the Board-approved process, effective 2022 election cycle:

### A. Approved APA-managed campaign activities starting 2022 election:

1. "Meet-the-Candidates" virtual live Town hall events/Webinars with Q&A:
  - "Meet-the-Candidates" live sessions open to all APA members.
  - Sessions will be recorded for viewing by members who are unable to attend.
2. "Special Edition" APA Election Newsletter with candidate position/platform statements:
  - An electronic publication dedicated to candidate position/platform
3. *Psychiatric News* December Print Election Issue (continued)
4. Expansion of APA Election Website (centralized location for all election/candidate-related information)
  - Includes candidate photos and bios and individual candidate campaign section of the website.
  - Includes links to election publications and webinar recordings.

### B. Approved Updates to APA Election Guidelines

To achieve an equitable and inclusive elections process, the Board of Trustees approved multiple updates to the current *APA Election Guidelines*. The approved changes are in accordance with the Board action of a new 2-year pilot election process starting 2022.

#### *Highlights of approved changes*

- Campaign e-mails, telephone calls, and letters to members are **not** permitted.
- Use of all APA listservs, including Member-to-Member listserv, is **not** permitted.
- Endorsement guideline is added (**new**).

- Guideline regarding Use of Candidate Position Title is added **(new)**.
- Any campaign activity needs to be approved by the Elections Committee **(new)**.

To view the updated APA Election Guidelines, visit the APA Election Website.

**C. Charge and Composition of Elections Committee starting 2022 election:**

During the March 2021 Board of Trustees Meeting, the charge and composition of the Elections Committee was expanded to effectively and efficiently manage the elections process, including, enforcement of guidelines in the event of violations. Effective during the 2021–2022 period, the Elections Committee has a fifth member.