**November 2013 APA Assembly Report**

**By Robert Feder, M.D.**

**New Hampshire Assembly Rep**

1. **Parity**

As the Assembly was meeting, on November 8 the Department of Health and Human Services announced that the final rules for the federal parity legislation passed five years ago had finally been issued. These rules make it very clear that insurance companies can do nothing in regard to how they authorize/approve/process mental health benefits that differs in any way from how they treat other medical benefits. If they do so, they are breaking the law. This is very good news. The bad news is that Medicare and Medicaid are exempted, and the enforcement of these rules has been left up to the insurance commissioners in the individual States. We will have to wait and see how this plays out in New Hampshire, but the State Insurance Commissioner’s office is where complaints should be filed if you feel a commercial insurer has not acted appropriately.

Patrick Kennedy, former congressman from Rhode Island and the primary sponsor of the federal parity bill, gave a rousing speech to the Assembly. He made many inspiring and motivating statements regarding the need for parity laws in view of the stigma that still surrounds mental health issues, the unique ability of psychiatrists to be able to treat mental illness, and the need for psychiatrists to be adequately reimbursed for treating “the most important organ in the body”. He is clearly a friend and strong advocate.

1. **Finances**

The APA’s financial status has gone from stable to robust, primarily as a result of the publication of DSM5. We have a $25 million operating surplus for 2013, supported mainly by $18 million in DSM5 sales. Most of this money will be returning to the reserves, from which a similar amount was borrowed to develop DSM5. The reserves are doing very well, reflective of a good year in the U.S. stock market.

1. **Membership**

Income from membership dues remains stable. There was a slight increase in total APA membership over the past year.

1. **Assembly Actions**

The Assembly passed the following notable actions. These will still need to be approved by the Board before they become official APA policy.

1. Position Statement on Medical Use of Marijuana - This paper cites the lack of any evidence that marijuana is beneficial for any mental illness, as well as the increasing evidence that it may be harmful. It encourages a very cautious approach toward the use of marijuana in situations which do show benefit (glaucoma and nausea). The paper includes an excellent reference list.
2. Position Statement on Homosexuality – Emphasizes that homosexuality is not an illness, rather an object choice based on yet to be elucidated biological and psychosocial factors. States that attempts to change homosexual to heterosexual behavior should be discouraged, and that homosexuals should be afforded the same civil rights as heterosexuals.
3. Position Statement on Legislative Intrusion and Reproductive Choice – States that legislation which attempts to limit women’s reproductive choices by mandating counseling to discourage abortion or birth control is officially opposed by the APA
4. Changing “Member-in-Training” (MIT) to “Resident-Fellow Member” (RFM) – This would change the term used to refer to members of the APA currently in residency or fellowhip programs. It was felt to be less confusing and more consistent with other medical groups.