COVID-19 Hero's:
IPA's Healthcare Reimbursement Committee

Expressing our appreciation for the advocacy and support these volunteers have been giving to IPA members during this time of crisis. Thank you!

Patricia Farrell, PhD, Chair
Neil Pliskin, PhD, ABPP
Lynda Behrendt, PsyD, RN
Theresa Schultz, PhD

Psychologist's Toolkit—
The COVID-2019 Pandemic
Kalyani Gopal, PhD, IPA President

Levels of spreading diseases

The WHO defines a pandemic as "the worldwide spread of a new disease." There are four levels of severity of spread of disease:

OUTBREAK: An illness that affects a greater density of a certain population than expected. E.g., Minamata disease caused by exposure to mercury.

ENDEMIC: An infection within a geographic location that exists permanently, i.e., an illness restricted permanently to a certain geographical area. E.g., Dengue Fever.

EPIDEMIC: According to the WHO, an epidemic is, "the occurrence in a community or region of cases of an illness, specific health-related behavior, or other health-related events clearly in excess of normal expectancy. The community or region and the period in which the cases occur are specified precisely. The number of cases indicating the presence of an epidemic varies according to the agent, size, and type of population exposed, previous experience or lack of exposure to the disease, and time and place of occurrence.

Continued on page 2
A disease reaches 'Epidemic Threshold' which is "the critical number or density of susceptible hosts required for an epidemic to occur." E.g., Malaria, Influenza.

PANDEMIC (global epidemic): Simply put, a pandemic is a type of epidemic (one with greater range and coverage and not vice versa) an outbreak of a disease that occurs over a wide geographic area and affects an exceptionally high proportion of the population. So, for example, we can have 'seasonal influenza' and 'pandemic influenza'. While the deaths from flu in the US is 0.02% the deaths from COVID-2019 have been placed at 1-2% which is 20 times more than the flu. On average, we have 20,000 deaths yearly from the flu.

Responsibility and preparedness

On March 11, 2020, the WHO declared COVID-2019 as a pandemic. One of the major reasons cited was the ‘inaction’ by the world institutions for failing to provide timely and necessary response. This declaration requires the governments to develop preparedness plans, activate drastic emergency procedures, and create conditions that protect their citizens. Back in 2007, the WHO had recognized the rapid rise of new diseases [link].

The key recommendations of this report include:

- Full implementation of the revised international health regulations (IHR 2005) by all countries
- Global cooperation in surveillance and outbreak alert and response measures
- Open sharing of knowledge, technologies, and materials, including viruses and other laboratory samples
- Cross sector collaboration within governments, and
- More international and national resources for training, disease surveillance, laboratory capacity, response networks, and prevention campaigns." Margaret Chan, then WHO’s Director General stated, “International public health security is both a collective aspiration and a mutual responsibility. The new watchwords are diplomacy, cooperation, transparency, and preparedness.” Each country needs to ask itself if this is being practiced and it is up to their citizens to reach out to their state and national legislators.

Covid-19

Several links are available to learn about the COVID 19. On December. 31, 2019 the WHO was informed of the cases of pneumonia of unknown cause in Wuhan City, Hubei Province in China. It was named the Novel Corona Virus and in February 2020 as COVID-19. On March 11, 2020, it became classified as a pandemic.

SYMPTOMS:
- Low fever spiking with high fever
- Cough (sometimes)
- Body aches/headaches and test negative for the flu
- Fatigue
- Breathing difficulty (lowered O2 blood levels)
- Diagnosis at Death: Interstitial Pneumonia

[link]

HIGH RISK:
- 65 years and over
- Compromised immune systems
- Individuals with underlying medical conditions and/or substance abuse

ADDITIONAL LINKS:
[link]

EPIDEMIOLOGY (updated continuously):
[link]

What we/patients can do

- Social Distancing: 6 feet distances
- Avoid public transportation
- Avoid gatherings
- WASH HANDS FREQUENTLY
- Do not visit nursing homes or closed units to visit family
- Stay home if sick with flu or with coughs and fatigue
- Cancel non-essential appointments in schedules
- Contact providers for Telehealth appointments

Continued on page 4
Throughout recent IPA Newsletters I have focused my attention on A Need for Healing. I hope you have followed along as I have worked to raise awareness of the need for cultural, individual and association healing.

In a painful twist of irony, I found myself in need of my own physical healing recently. Perhaps many of you are aware of my recent accident, when the attic ladder I was on at home broke, and I fell three to five feet onto my back on concrete. The fall resulted in a burst fracture of the L1 vertebrae, necessitating a week-long hospitalization and spinal fusion surgery. I am grateful for excellent medical care, a skilled surgeon, tremendous nursing care, and the support of friends and loved ones, which all contributed to my making a relatively speedy recovery and a faster than expected rehabilitation. I humbly express gratitude for the outpouring of support, kindness, and understanding extended to me by our IPA community. I can tell you spending several days in the hospital, immobilized on my back staring at the ceiling, gave me a lot of time for contemplation.

IPA has also been going through a similar process of introspection and contemplation. I have witnessed IPA leaders engaged in thoughtful discussion about the purpose, utility, and values of our association. Your experiences and opinions may have been solicited through Section surveys recently. Our Membership Committee is currently working to develop a broader survey of membership, exploring what you value and what you need. At the January 2020 IPA Council meeting we discussed how to continue to make IPA relevant, and how to demonstrate value to our membership. Specifically, there have been ongoing discussions related to the challenge of balancing “guild issues,” such as maintaining psychology licensure and promoting the practice of psychology in Illinois, with “social justice issues,” such as taking a stand against discrimination and marginalization. We have also acknowledged the need to better market the work IPA is already doing, in order to demonstrate to psychologists throughout the state the value of IPA membership. As a result, IPA is working to improve our social media presence. If you have not already, please connect with IPA online, including on twitter (@ILPsychology) and on Facebook (facebook.com/ILPsychology).

In recent months, our attention has shifted towards the planning of this year’s IPA Convention. We are continuing the planning process for the 2020 IPA Convention with a continued focus on individual and association healing. In thinking about convention planning, I have considered how our convention will take place just days after the November 3, 2020 National Election, and only weeks before Thanksgiving. Sandwiched in between these occasions, I anticipate the need for thoughtful and empathic reflection, as well as the likely need for national healing and reconciliation.

In this newsletter you will see the call for programs. I would ask you to please consider how you can lend your expertise in the area of healing. When considering Social Responsibility within our profession and how
President’s Message… Continued from page 2

- Ensure prescription medications are stocked
- Avoid pleasure trips such as cruises, airplanes, boats
- Avoid community pools, drinking water and food where origin is unclear
- Quarantine—for 14 days if exposed to any contagious disease
- Canada’s “Think, Tell and Test”
  - Think about the possibility of an emerging respiratory infection (e.g. novel influenza A virus)
  - Tell the local medical officer of health or local public health official
  - Test for pathogen only after appropriate consultation and based on clinical symptoms
- Avoid reading about the illness obsessively
- Do not shake hands with patients
- Avoid panic buying
- Save masks etc. for healthcare workers/first responders who really need it
- Clean and disinfect high-contact surfaces and objects like door handles, toilets and toys, laptops, pens, refrigerator handles, faucets
- Thoroughly cook meat and eggs

What Psychologists can do to help

As the pandemic spreads into our neighborhoods, anxieties, isolation fears, and dreading one's neighbors increases. Panic builds and friends who so much as sneeze get "mentally shot." Quarantine and isolation have differing psychological sequelae. Quarantine is when one is exposed to the virus via others and isolation is when one is diagnosed with it and hopefully undergoing treatment.

As mental health practitioners we can support our anxious patients with mental illness in many ways:
- Offer telepsychology services to anxious or sick patients
- Create an online support system for patients with group chats
- Develop an emergency response system for our clinics/patients

Psychological effects of quarantine and isolation differ [https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30460-8/fulltext](https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30460-8/fulltext)

- David Cates, PhD, a clinical psychologist and behavioral health consultant to UNMC’s Nebraska Biocontainment Unit and National Quarantine Center suggests town hall style meetings for quarantined individuals with questions about fears, loneliness and negative emotions. He ends these meetings with what he calls the question of the day:
  1. “How have you been staying active?”
  2. “How have you grown or made a positive change as a result of this experience?”
- For individuals who have quarantined themselves the following support can be given:
  - Provide mindfulness apps
  - Share resources about positive psychological practice
  - Create zones of healing within the home that are safe to relax in
  - Provide partnership exercises for families
  - Have them engage on social media and post positive news and events
  - Have telepsychology sessions daily to do wellness checks
  - Reduce boredom by creating new hobbies
  - Encourage E-learning new skills
  - Take online courses on fun activities
  - Increase activity via yoga, Tai Chi, or simply walking back and forth for handicapped individuals
  - Cooking at home and trying out new fun ways of eating home-cooked meals
  - Lending support with delivery services or having family drop off groceries
  - Alleviate anxieties through relevant research, encouraging a sense of control over their lives.
  - For isolated individuals use positive CBT techniques and affirmative techniques to:
    - Need for rest and compliance
    - Reduce fears of dying by creating alternative modes of thinking and acting

Continued on page 10
IPA Continuing Education Opportunities for Illinois Psychologists

2020 COVID-19 Related Changes

Neuropsychological Problems Encountered in Your Clinical Practice
Originally Scheduled for Friday, March 27, 2020
This workshop has been postponed. A new date will be set for the future.

Cognitive Rehab—Dr. Katherine Borchardt
Concussions—Dr. Patricia Pimental
Headaches—Dr. Gregory Harms

Risk Management and Ethics: Sequence X: Perplexing Problems in Psychological Practice: Decision Science, Ethics and Risk Management
This Workshop will be a live interactive webinar. A link will be provided to all registrants.

Friday, April 17, 2020, 9am-4:30pm
Presented by Amanda D. Zelechoski, JD, PhD, The Trust

IPA has annually hosted this program sponsored by The Trust Liability Insurance Company. The 6 CE qualifies for the Illinois Ethics licensure requirement and gives a premium discount to psychologists who are insured with The Trust.

Closing a Psychological Practice
Originally Scheduled for May 8, 2020
This Live and Interactive 3-hour Webinar via ZOOM a has been postponed.

The Spring Institute in Bloomington Illinois
This workshop has been cancelled due to the COVID-19 pandemic. A full refund will be given to all registrants.

Sexual Harassment Prevention and Mandated Reporter Training for Illinois Psychologists
This will be a live interactive webinar offered on May 29th from 4pm-6pm.

This 2.5-hour workshop will be offered to meet the requirements of psychologists before their September 30, 2020 license renewal date. A second date will be announced soon.

You can register for the May 29th workshop at this URL: https://beacon360.content.online/xbcs/S2041/catalog/product.xhtml?eid=18777

FOR MORE INFORMATION ABOUT OUR WORKSHOPS GO TO: www.illinoispsychology.org
Two New Mandated CE Programs for Psychologists

Sexual Harassment Prevention Training  
AND  
Recognizing and Reporting Child Abuse: Training for Mandated Reporters

A Live Interactive Webinar  
Sponsored by the  
ILLINOIS PSYCHOLOGICAL ASSOCIATION

Friday May 29, 2020 from 4 – 6:30pm  
A second Webinar will be offered at a later date

2.5 Continuing Education Credits  
$30 for members/$45 for non-members

Registration

Registration can only be done online with the link provided below.  
Registration is not be handled through the IPA Office.  
Please do not call or email the office to register, however if you have trouble with the link let us know.

REGISTER
About the Webinar

The Illinois Legislature enacted two laws that apply to Licensed Clinical Psychologists. Both statutes require training and are required before you renew your license on September 30, 2020. Both require that you retain documented proof of the training. The training provided by the Illinois Psychological Association will count towards meeting the licensee’s required continuing education hours. Even if you have already obtained your required [24] CE, this training must also be taken.

Why take this training?

- This training offered by the Illinois Psychological Association count towards meeting your required continuing education hours.
- Psychologists across the entire state of Illinois will enjoy ease of access as IPA will present the CE training in interactive webinar format.
- The combined trainings are affordable for IPA members at $30.
- Each combined topic is scheduled once in the Spring and once in Summer as a two- and-a-half-hour webinar.
- The CE training will be applicable to private and group psychological practices.
- Trainings offered by other entities may not qualify for APA continuing education credits, which are approved by the Department of Professional Regulation. This training does.

THE WORKSHOPS

Child Abuse Reporting Training (90 Minutes)

Each mandated reporter shall report to his or her employer and, when applicable, to his or her licensing or certification board that he or she received the mandated reporter training. The mandated reporter shall maintain records of completion. This law states that “Persons required to report child abuse or child neglect must complete an initial mandated reporter training within 3 months of their date of engagement in a professional or official capacity as a mandated reporter, or within the time frame of any other applicable State law that governs training requirements for a specific profession and at least every 3 years thereafter.”

Presenter Erin Alexander, PsyD
Illinois Department of Child Protective Services

Dr. Erin Alexander is a Licensed Clinical Psychologist. With over 15 years of clinical service, leadership experience and continued professional development. Dr. Alexander has held positions as a therapist, adjunct professor, supervisor, trainer, consultant and professional mentor. She currently has a thriving practice in Downtown Chicago where she works with a diverse group of individuals, couples and families. In addition to her practice, Dr. Alexander has worked as a Consulting Psychologist for DCFS since 2012. In 2017, Dr. Alexander was promoted to the Assistant Program Administrator position for the statewide Psychology & Psychiatry Program and as of 2019 Dr. Alexander assumed the role of Program Administrator.

Dr. Alexander is an active member of both the American Psychological Association (APA) and the Illinois Psychological Association (IPA). She is the Section on Ethnic Minority Affairs (SEMA) committee chair and serves as a member of IPA’s Legislative Committee. In 2019, Dr. Alexander was honored to have received a three year appointment to the American Psychological Association’s Minority Fellowship Program Training Advisory Committee, where she will have the opportunity to select, mentor and provide advisory assistance to a talented pool of psychology graduate students from across the country.

The training shall include the following topics:

- Indicators for recognizing child abuse and child neglect as defined under this Act;
- The process for reporting suspected child abuse and child neglect in Illinois as required by this Act and the required documentation.
- How to respond to a child in a trauma-informed manner.
- Understanding the response of child protective services and the role of the reporter after a call has been made.

Continued on page 8
Sexual Harassment Prevention Training (60 minutes)

Sexual harassment prevention training is required for all persons who hold a professional license issued by the Division of Professional Regulation (DPR) for professions that require CE to renew.

The law requires licensees to complete a one-hour CE course in sexual harassment prevention training. This CE requirement is included in the number of hours already required under the individual Acts and Rules and does not increase the number of hours required to renew a license. If you are a licensed psychologist, you must complete this training before you renew your license at the end of September 2020. This one-hour training counts towards the twenty-four hours required for every two-year licensing period.

Presenter: Margot Jacquot, PsyD
The Juniper Center

Dr. Margo Jacquot is a Licensed Clinical Psychologist, Certified Supervisory Addictions Counselor and Board Certified Expert in Traumatic Stress. She is also a local and national lecturer on trauma recovery, substance abuse, LGBTQ issues, and working with couples. With over 25 years of experience as a therapist and lecturer, Dr. Jacquot has taught graduate and post-graduate courses in treating trauma, substance abuse, couples and families and LGBTQ affirming therapies. While a traditionally trained psychodynamic therapist, Dr. Jacquot’s style is holistic, interactive and she utilizes a variety of approaches to help people achieve their goals. Dr. Jacquot is Certified in EMDR (Eye Movement Desensitization and Reprocessing. Dr. Jacquot provides clinical consultation to other therapists regarding treating trauma, substance abuse, couples therapy and sensitivity to LGBTQ issues in therapy, as well as private practice development and management. Another passion is consultation to businesses and community organizations regarding behavioral health and healthy workplace policies. An active member of several community-based organizations, Dr. Jacquot has served on the board of the Illinois Psychological Association.

This comprehensive sexual harassment training program includes the following information:

• Description and clarification of sexual harassment;
• Examples of sexual harassment conduct;
• Information about government provisions, such as remedies available to sexual harassment victims;
• Information about employer’s responsibility to prevent, investigate, and correct sexual harassment;
• Options available to report allegations of sexual harassment;
• Information about retaliation, also known as “whistle blower” protections;
• Penalties for sexual harassment, false reports, and interfering with, obstructing, or failing to cooperate with a sexual harassment investigation.

CONTINUING EDUCATION CREDITS

This webinar is sponsored by the Illinois Psychological Association. The Illinois Psychological Association is approved by the American Psychological Association to sponsor continuing education for psychologists. The Illinois Psychological Association maintains responsibility for this program and its content.

CANCELLATION POLICY

No refunds will be offered for this workshop. Grievances about the workshop may be addressed to the Illinois Psychological Association in writing.

ACCESSIBILITY

The Illinois Psychological Association is committed to accessibility and non-discrimination in continuing education activities. Presenters and attendees are asked to be aware of the need for privacy and confidentiality during and after the program. All questions, concerns, or complaints should be directed to Ms. Karey (312/372-7610 x201 or mkarey@illinoispsychology.org).

There is no commercial support for this program, nor are there any relationships between the CE sponsor, presenting organization, presenter, program content, research, grants, or other funding that could reasonably be construed as conflicts of interest.

— REGISTRATION CAN ONLY BE DONE ONLINE —

If you are currently not an IPA Member and would like to join please go to: www.illinoispsychology.org
IPA Executive Director Message

Marsha Karey

These are unprecedented times. The Covid-19 crisis has impacted all aspects of our lives. As psychologists you had to adapt quickly to find new ways to serve and see your patients; practicing telehealth, perhaps for the first time during this crisis.

The IPA listserv community has been a helpful source of information for IPA members, dealing with telehealth and billing issues. So many of you have jumped in and shared such helpful information. Thank you to all who have contributed with helpful links and information, too many to name individually. I would especially like to thank Dr. Patricia Farrell, Healthcare Reimbursement Committee Chair (HCRC), and her Committee members, Drs. Neil Pliskin, Lynda Behrendt and Theresa Schultz. They have spent countless hours volunteering their time, finding answers with lightning speed, providing resources to help guide psychologists during this constantly changing and difficult time. IPA members and IPA leadership are so grateful to have such an extraordinary HCRC team!

As you can image the IPA office has been overwhelmed with calls and emails regarding the status of workshops and fielding questions regarding how your practice may be impacted by Covid-19. Dr. Terry Koller has responded to many members’ calls and emails, even on weekends and evenings. Thank you, Terry!

Check out IPA’s website; helpful links are listed providing resources and helpful information related to Covid-19.

Just a week or so before the Covid-19 crisis exploded, I attended the APA Practice Leadership conference in Washington D.C., along with Drs. Kalyani Gopal, Erin Alexander, Fahad Khan, Jeffrey Kellogg and Terry Koller. We attended workshops for several days and spent a day lobbying on Capitol Hill. I would like to thank everyone who attended PLC, each gave up her/his weekend as well as workdays providing advocacy for our members and people we serve. For more information on PLC please see Dr. Khan’s article in this newsletter.

The Covid-19 crisis has forced us to postpone, cancel and or change in-person workshops to live webinars.

- The Neuropsychology Workshop that was scheduled for 3/27 has been postponed. We are hoping that this workshop will be held later in the year.
- The Risk Management Workshop on 4/17 has been changed to a live interactive webinar, same date and time.
- The Spring Institute: Intensive Telepsychology Training on May 8 & 9 was cancelled.
- Mandated CE webinar programs for Psychologists: Sexual Harassment Prevention Training & Recognizing and Reporting Child Abuse: Training for Mandated Reporters will be held via a live webinar on Friday, May 29th from 4-6:30pm. Registration is still open, visit the IPA website to register. An alternative date will be also offered.
- The IPA 2020 Annual Convention is slated for November 12-14th at the Holiday Inn Northshore, in Skokie. The call for programs is in this newsletter.

It was disappointing to cancel the Spring Institute Intensive Telepsychology Workshop, especially since the topic is so relevant and many of you were looking forward to attending. Dr. Mary Dellorto, IPA’s North Central Region Representative, was integral in securing the presenter, Dr. Marlene Maheu, and planning this workshop. I would like to thank Mary for all her time and effort planning this workshop, which included many calls over a weekend with the presenter and IPA leadership trying to figure out a way to still hold this workshop.

Your vote counts! IPA Elections are open on Friday, May 1st when ballots “go live”. Voting closes on Monday, June 1st. Please participate. If you have questions, concerns or experience technical issues please contact the Elections Committee Chair, Ashley Houchin.

Continued on page 23
we can help our community, I invite you to think about how we can continually serve the public and maintain our professional practice, while also taking care of ourselves. How do we help heal our environment and at the same time continue to heal and take care of ourselves? How do we support each other within IPA and use the association to support one another? I strongly encourage you to consider submitting program proposals focusing on psychologist self-care, improving group cohesion, promoting community and organization interconnectedness, reconciling differences, bridging differences of opinion, conflict resolution, promoting unity and solidarity, bridging political divides, understanding cultural differences, promoting tolerance, and cultivating understanding, diversity, intersectionality, and healing.

We are excited to report that the dates and location of the 2020 Convention have been solidified. For the first time in more than a decade, from November 12th through the 14th, we will be returning to the Holiday Inn Chicago North Shore. Their newly renovated space is conveniently located near public transit, and “is surrounded by shopping, attractions and dining. Located just blocks from the Edens Expressway (I-94), with equally convenient access to I-90 and I-294.”

I am now looking to you to act, through engagement with IPA governance, through involvement with IPA Sections or committees, or by submitting a proposal for this year’s convention. I continue to welcome your feedback and ideas about how to improve our association, how to make the year ahead as successful, collaborative, and inclusive as possible. Specifically, I welcome thoughts on how to increase membership engagement.

Dr.DanielBrewer@gmail.com
773/413-6006

Our accountants have informed us that 100% of what licensed members paid in legislative assessments is not deductible for tax purposes. However 100% of everyone’s membership dues is deductible for tax purposes. Keep in mind that legislative assessments are the additional fees that licensed members pay ($60 plus an additional special assessment based on income).

“The future cannot be predicted, but futures can be invented.”

—DENNIS GABOR, INVENTING THE FUTURE (1963)

Enjoy what’s left of life. It is too short, and before you know it, the precious breath of life is gone and no matter how much your loved ones miss you, there is no magic portal back. So, don’t sweat. Life happens.

Best wishes,
Kalyani Gopal, PhD
President (2019-2020)
CALL FOR PROGRAMS

Illinois Psychological Association
2020 Annual Convention

Coming Together:
A Focus on Healing

Thursday, Friday and Saturday
November 12-14, 2020

Holiday Inn Northshore
Skokie, Illinois

Program Committee Chair: Daniel Brewer, Psy.D.

Committee Members:
Gregory Sarlo, PsyD., Clifton Saper, PhD.,
Abigail Damsky Brown, PsyD.

Submit your proposal via email
Do not mail or fax at this time
Please send, no later than June 1, 2020

TO:
mkarey@illinoispsychology.org
You are invited to submit a proposal for the 2020 Annual Convention of the Illinois Psychological Association to be held November 12-14, 2020. We would ask you to please consider how you can lend your expertise in the area of healing. When considering Social Responsibility within our profession and how we can help our community, we invite you to think about how we can continually serve the public and maintain our professional practice, while also taking care of ourselves. How do we help heal our environment and at the same time continue to heal and take care of ourselves? How do we support each other within IPA and use the association to support one another? We strongly encourage you to consider submitting program proposals focusing on psychologist self-care, improving group cohesion, promoting community and organization interconnectedness, reconciling differences, bridging differences of opinion, conflict resolution, promoting unity and solidarity, bridging political divides, understanding cultural differences, promoting tolerance, and cultivating understanding, diversity, intersectionality, and healing.

Please Complete and Return

1. Chairperson of Program (The Chair and all presenters must submit a one-page vita/resume demonstrating experience and/or training in the topic of the program.) (All future contact will be made with the Chair only.) The program chair must be an IPA member. Panels are limited to 4 people.

   NAME ______________________________________________________________________________________________

   INSTITUTION NAME or PRIVATE PRACTICE _____________________________________________________

   MAILING ADDRESS ______________________________________________________________________________

   ____________________________________________________________________________________________

   NAME ______________________________________________________________________________________________

   INSTITUTION NAME or PRIVATE PRACTICE _____________________________________________________

   MAILING ADDRESS ______________________________________________________________________________

   ____________________________________________________________________________________________

   E MAIL ADDRESS ___________________________________________________________________________________

   PHONE NUMBER: CELL __________ OFFICE __________________________________

2. Program Title (Titles longer than 10 words will be shortened)

   ____________________________________________________________________________________________

   ____________________________________________________________________________________________

3. Program Length: ☐ 1.5 hours ☐ 3 hours*

4. Program Type (circle one)

   ☐ SYMPOSIUM 1 TO 4 EXPERTS (INCLUDING Chair) present a topic for 1.5 or 3 hours.*

   ☐ PAPER Presentation on a selected topic for 1.5 or 3 hours. *

   ☐ CONVERSATION 1 TO 3 EXPERTS (INCLUDING Chair) lead a discussion and questions/answer session on their field of expertise for 1.5 or 3 hours.*

   *Please Note: 3.0-hour time slots are limited. 1.5-hour programs are preferred. The program committee reserves the right to limit programs to 1.5 hours if time is limited.

5. Other Program Participants: Please attach a document with the names, degrees, mailing addresses, email addresses and telephone numbers of additional presenters.

6. Description of Program/Paper: Submit an abstract of the proposed program. (typed, double spaced, 50 words or less—abstracts longer than 50 words will not be accepted). If chosen, this description will be used in the Convention Brochure.
7. **Learning Objectives:** IN ORDER TO QUALIFY FOR APA CONTINUING EDUCATION CREDITS YOUR PROGRAM MUST LIST LEARNING OBJECTIVES THAT WE WILL PLACE ON YOUR PROGRAM EVALUATION FORM. PLEASE LIST TWO LEARNING OBJECTIVES FOR A ONE-HALF HOUR PROGRAM AND 3 LEARNING OBJECTIVES FOR A THREE HOUR PROGRAM.

8. **Reference List:** IN ORDER TO QUALIFY FOR APA CONTINUING EDUCATION CREDITS YOUR PROGRAM MUST LIST 5 OR MORE CITATIONS (WHICH SUPPORTS ACCURACY OF PRESENTED MATERIAL).

9. **Audio Visual Equipment or Presentation Equipment**

   *Choice of equipment must be made with the proposal. We cannot accommodate requests made immediately before the program start time. Each program room will also be set with a speaker’s table and podium with microphone.*

   IPA will provide an LCD Projector and screen for PowerPoint presentations at no charge to the presenter. IPA does not provide laptops. If additional equipment is required it is the responsibility of the presenter to inform IPA (See additional equipment below). IPA cannot accommodate requests made immediately before the program starts.

   ○ I will need an LCD Projector and Screen *(you must bring your own laptop)*

   Please check:
   ○ I will be using a PC
   ○ I will be using a MAC (please bring your own adaptor)

   Please check:
   My laptop display port is  ○ VGA  ○ HDMI

   If your PowerPoint presentation requires sound, this could incur additional charges not paid by IPA. Please contact the IPA office (312/372-7610 x201).

   ○ I do not require any audio visual equipment.

   *If any additional equipment (i.e., Flip Charts, easel DVD player/monitors) is needed, you will need to contact the hotel’s audiovisual department directly to make arrangements and to set up billing.*

10. **IPA Membership Status:**  ○ Full Member  ○ Affiliate  ○ Student

   *The Program Chair must be an IPA member*
Coming Together: A Focus on Healing
Thursday, Friday and Saturday
November 12-14, 2020

Program Proposal “Check List”

- Chairperson Resume
- Program Title
- Length
- Type
- Other Participants Resumes
- 50 Word Abstract
- Learning Objectives
- Reference List
- Equipment Needed
- Member Status

- I agree to present if the program is accepted by the Committee.
- I agree that my presentation will abide by the APA Ethical Principles of Psychologists and Code of Conduct.
- I agree that I will register for the convention if I plan to attend programs other than my own.

NAME ___________________________________________________________________________

SIGNATURE ___________________________________________________________________________

DATE ___________________________________________________________________________

Return this form and supporting documents by June 1, 2020

TO:

mkarey@illinoispsychology.org

If you have any questions, please call:

312/372-7610 x201
APA Strives for IMPACT

Clifton Saper, PhD, IPA Representative to the APA Council

I just returned from the winter meeting of the APA Council of Representatives (COR). The theme of the meeting was “Lead by example,” as the APA continues its transformation based on the strategic plan passed last year. The transformation involves bringing advocacy to issues of social justice and science in addition to the traditional professional practice issues.

Equity, Diversity, and Inclusion (EDI) were the watch words for the group. These are not only critical societal concepts, but also ideas to live by within the Council. Through large and small group trainings, experiential interactions, polling, and comments at the microphone, we were holding each other accountable for the “Content” (what we choose to work on and not work on), the “Capacity” (how we creatively work and process together—not just achieve goals), and “Culture” (insuring that everyone is able to contribute, which may not always be comfortable). I also found this emphasis to be relevant to our IPA work and my work in the community and in a large Health System.

Sandra Shullman, PhD, President of APA and Arthur Evans, PhD, APA CEO both stressed that APA must have a significant impact on policy making and every aspect of human life and human performance. APA should be a respected voice in the world. APA should continue to foster the growth of the discipline of psychology and the resilience of psychologists.

The following resolutions, reports, and guidelines were addressed:

- Resolutions on Opposing Discriminatory Laws, Policies, and Practices Aimed at LGBTQ+ Persons; on Sexual Orientation, Gender Identity, Parents and their Children; and on Supporting Sexual/Gender Diverse Children and Adolescents in Schools
- COR reaffirmed its position on violent video games and violent behavior-cautioning against oversimplification of this complex issue, because there is insufficient scientific evidence to support a causal link
- COR reaffirmed psychologists’ roles in combating climate change and treating the mental health effects that arise from changes to the planet’s climate

Issues related to the organization of the APA led to heated discussions. Questions about the delegation of Council authority on budgetary issues to the Board of Directors and responsibility for writing pro/con statements on by-law changes submitted for a vote to the membership were debated. Specific votes will occur at the August COR meeting. Delegation of authority will again be reviewed every three years.

APA finances were presented. To align the current budget with the new strategic plan, the organization is running on a deficit budget. There was a 2019 revenue of approximately $129.8 million and expenses were about $148.5 million. The deficit is made up with $11 million from the Strategic Investment Fund and the rest from the APA long-term investment portfolio. Although membership is fairly stable, member dues account for only a small amount of the APA revenue. APA real estate in DC and the APA publishing arm are the biggest revenue producers.

Please connect with me for more detailed information coming from the COR winter meeting. Find the Reports and Resolutions on the APA web site. If you are interested, I can email you the official meeting minutes with voting tallies, etc. when they are published.

I end with a quote from the meeting, attributed to the Dali Lama: "If you want to be happy, practice compassion. If you want other people to be happy, practice compassion."  

cliffsaper@gmail.com

www.illinoispsychology.org
Greetings from the ECP section! I wanted to start off by thanking both ECP’s and non-ECP’s who have joined the ECP section. Did you know that you don’t have to been an early career psychologist in order to join the section? We are so grateful to have mid and later-career psychologists who have been so supportive of early career initiatives as this surely will ensure the long-term growth of IPA! We have a strong membership and hope to continue to grow this year. Additionally, we are thrilled that Dr. Ella Yung took on the role as Associate Chair of the ECP Section this year and we welcome her to IPA leadership!

We started off the year by surveying our membership on issues most relevant to early career psychologists. We learned that many of our members have concerns about student loans, the implementation of the EPPP part 2 in the state of Illinois, and private practice concerns (e.g. starting a business, insurance reimbursement, etc). This past January I hosted a group of ECP’s for a round table discussion on these issues and began discussing how we can better support ECP’s through advocacy and programming on these topics. Currently, we are looking at the potential impact of the EPPP part 2 on graduate students and license eligible individuals and exploring how we can advocate our concerns on its implementation in Illinois. Additionally, we are in the beginning stages of organizing a practice management event, likely next year, to provide consultation and resources for those considering starting their own business. We have other events in the pipeline so keep an eye out!

As Chair of the ECP Section, I am committed to speaking and meeting with our early career constituents in order to learn what is important to each individual member and determine how our larger organization can serve these needs. I welcome any ECP, whether a member of the section or not, to reach out to me atabbybrownpsyd@gmail.com.

IPA Council Elections:
OPEN May 1st and CLOSE June 1st

In the last 3 years, more than 75% of IPA Members did not participate in the election. A candidate wins the election by receiving a majority vote. Therefore, every vote counts and your participation is important!

Cast your ballot at this website: https://vote.associationvoting.com/ipa/

You will receive an email from “announcement@associationvoting.com” supplying you with a Log-In and Password to participate in the nominations and elections. The voting software is mobile friendly so you can vote with your smartphone, tablet, or desktop.

You must be a member of the section or regional position for which you are voting. Additionally, the individual you are electing must also be a member of the section or regional position for which you are voting. If your membership is out of date, you will not be eligible to vote.

If you choose to campaign for a position, we encourage you to contact colleagues personally. Campaigning is not allowed on the IPA Listserv.

The Nominations Committee is currently verifying all nominated candidates for this year’s positions. Please look for candidate information on the IPA Website, as well as on the Listserv and other advertising materials from the IPA.

For more information about each position and candidate, go to: https://illinoispsychology.org/sections

Continued on page 18
During the 1990’s managed care saw its heyday. Many in practice termed it “mangled care”. Little regulation meant payers commonly restricted behavioral health care to crisis stabilization. The norm required providers to complete an average 6-page handwritten narrative every 4-5 psychotherapy visits, and faxes were the medium! Does that mangled care memory make you shudder? It should.

In 2008 the federal government passed MHPAEA, affecting nationwide parity. It was a huge step forward, taking over 12 years of APA lobbying efforts to become law. The Affordable Care Act also moved the ball farther down the field, empowering providers. During 2019, the landmark Wit vs. UBH became a tipping point, as eleven plaintiffs alleged in a class action suit: “UBH failed to uphold its statutory obligation as a fiduciary by making benefits decisions based on its own financial interests rather than the healthcare needs of its beneficiaries”.


The Illinois Dept. of Insurance mandates use of specific level of care guidelines, thus, UBH was found to have violated Illinois state law (along with Connecticut, Rhode Island and Texas) per Judge Spero in the California federal court.

Also, the federal judge wrote an overview in the Wit Case which determined there was no single source of generally accepted standards of care, whereas multiple sources existed which can influence decisions related to parity and medical necessity.

In the court ruling, Judge Spero found: “UBH breached its duty and was liable, with respect to claims/benefits; UBH’s guidelines were more restrictive than generally accepted standards of care—emphasizing moving patients to a less restrictive setting, and creating a system of treating acute symptoms vs. long term improvements; and, UBH’s guidelines were fundamentally flawed because [the process] is tainted by UBH financial interests”.

So, how will the Wit ruling help your practice? A useful toolkit is available for behavioral health providers to enhance the probability of using effective appeals strategies. Of note, this toolkit does NOT contain legal advice and is not meant to imply legal authority. The National Council for Behavioral Health held a webinar on March 5th, 2020, and their strategic Power Point can be viewed online at: https://www.thenationalcouncil.org/events-and-training/webinars/webinar-archive/

Included in the presentation are helpful tools for executing effective appeals strategies, along with appeal letter templates, as well as insurance company review talking points for psychologists.

During the 1990’s, recovery as a treatment goal was seen as within generally accepted standards, yet with expansion of managed care, payers substituted the goal of crisis stabilization. The 2019 Wit verdict may level out the playing field (although in 2020 the case is currently in federal appeals court, initiated by UBH).

Effective payer/provider appeals/reviews might include citing the Wit verdict, one example: “I understand you and I disagree about the need for X level of care, but the patient’s Level of Care Utilization Standards (LOCUS) score aligns with my view, and it is the kind of multidimensional independent third party assessment used in most states and other countries that Judge Spero cited as essential in the Wit verdict.”

Providers are encouraged to document “(telephone) hold times, flawed numbers and different benefit explanations and PERSIST”:

If your practice uses an appeal template, it is suggested that providers cite rationale(s) from the Wit case ruling by Judge Spero. Use talking points from the Wit case when interacting with payer utilization review staff on the phone and advocate for peer to peer review vs. a chart review.

“A 2nd pivotal element within appeal letters is referencing professional or academic sources

Continued on page 27
Legislative Activity During the COVID-19 Pandemic
Terrence Koller, PhD, ABPP, IPA Legislative Liaison

The COVID-19 pandemic has resulted in a temporary shutdown of the Illinois legislature. The Illinois House cancelled its scheduled session for the week of March 30 and extended the committee deadline for House bills. The previous deadline, which was previously extended to April 3, has now been extended to April 24. The 3rd reading deadline for House bills will be extended to May 8, which will now be a scheduled session day. Note that these and other deadlines will be reviewed and extended as needed moving forward. It is likely that by the time you read this article the Illinois Senate will also be extending deadlines.

Our fantastic lobbying team, TayloUhe, LLC, has been keeping me apprised of developments in the legislature as well as up to the minute communications from the Governor. I am posting those updates to the listserv. Some members ask whether we can get the Legislature to act on issues like insurance reimbursement and other telepsychology issues. The answer is “no”. As mentioned above the legislature is not meeting and, when they do meet, it will likely be about budgetary issues such as the hospital assessment program. However, we will let you know, through the listserv, about any Executive Orders from the Governor, which make emergency changes to laws and rules as a result of the pandemic. If you are an IPA member and not a member of the listserv, I highly recommend you join. You can do so by sending me an email at tkoller@illinoispsychology.org.

That said, our lobbyists and I will keep a sharp eye on the legislature and inform you about any action on bills. We have been told that legislators can be called into session at a moment’s notice. Also, you can count on the Healthcare Reimbursement Committee to work with these issues. Their efforts will result in more immediate results. This Committee has been working in collaboration with the advocacy attorneys at APA to help with federal issues such as Medicare and to add power to our Illinois advocacy efforts.

Be aware of misleading information during this crisis. The IPA is working very carefully to publish information that has been checked for accuracy. We can publish the Governor’s Executive Orders and orders by other agencies, but we cannot interpret them. If something is not clear, we will work to obtain clarification. Please be patient. Read emails carefully. I personally cut and paste relevant emails into a Word document so that I can refer to it later when I have a question rather than search for old emails. You can also go to the IPA homepage, www.illinoispsychology.org to find resources. Our Executive Director, Marsha Karey, has done a wonderful job keeping these resources current and comprehensive.

During this pandemic, Marsha Karey and I will be working remotely. We have remote access to our desktops and messages left on our voicemails are emailed to us. One of us periodically goes to the office to retrieve mail.

I want to conclude this article by thanking the Advocacy division of APA. Their attorneys, Connie Galietti and Alan Nessman have been incredibly helpful in our advocacy efforts to ensure that psychologists are paid for their services during this stay-at-home order.

Report from the Elections Committee... Continued from page 16

For questions regarding the nomination or election process, please contact the Elections Committee Chair, Dr. Ashley Houchin at drashleyhouchin@gmail.com or the Associate Chair, Dr. Rachael Sytsma at rachael.sytsma.psyd@gmail.com

How can the Election’s Committee Chair/Associate Chair help me? We can clear your submitted vote if you made a mistake or would like to change your vote prior to the close of elections and we can see if you successfully submitted or “cast” your vote. We CANNOT see who you voted for, or manipulate your vote. We CANNOT cast a vote for any member.
Our IPA Leaders Trained for Two Days in Washington, DC at the APA Practice Leadership Conference Before Lobbying on the Hill

Drs. Beth Rom-Rymer, Kalyani Gopal, Congressman Danny Davis, Dr. Koller presenting him with an IPA Presidential Award.

Drs. Koller, Kellogg, Kalyani, Rom-Rymer and Kahn lobbying on the Hill.

Drs. Gopal, Rom-Rymer, Congresswoman Jan Schakowsky and Dr. Koller meet to discuss mental health reimbursement and access needs.

Dr. Fahad Khan meeting with Congressman Bobby Rush.

“TURN-KEY” NEUROPSYCHOLOGICAL ASSESSMENT, TREATMENT OFFICE CONDO AND PRACTICE FOR SALE

Northwest Neuropsychology Inc. (NNI) was incorporated over 20 years ago with original offices in Hoffman Estates, IL, and for the past 12 years in Schaumburg, IL. Whether you are an established medical center based neuropsychologist, an early career professional, or mid-career psychologist who wishes a change—becoming an entrepreneur and having the freedom of your own private practice—NNI would be a desirable choice. NNI is located in a modern, fully accessible medical and professional office complex approximately one mile west of the Woodfield Shopping Mall. Instead of paying rent, build equity in an office condo. as an investment. The NNI office features a waiting room, receptionist area, kitchen/file room, staff bathroom, small sinks in three consultation rooms, and two additional rooms. The office was designed by the owner for flexibility in 2007 so that rooms can be used for neuropsych/psych assessment; psychotherapy; consultation; group therapy; biofeedback; neurofeedback; and other meetings (e.g., depositions, staff training). The potential for transferring contracts with one or more HMOs, assuming a Department of Labor subcontract, and work for the Social Security Administration, all exist depending upon the preferences of the individual or individuals who succeed the current owner of the practice. Testing materials, four computers, WiFi network, wall-mounted TV monitors, new HP multifunction laser printer/scanner/fax, furniture, filing cabinets, and a variety of other amenities make this a “turn-key” opportunity. This situation is ideal for an individual or group willing to make a sizable monetary investment (approximately $500,000) to purchase an office condo. (with all aforementioned amenities included), referral base, and contracts. The purchaser must be an individual or group who understands the value of planning for the future by working diligently, expanding referrals, and further developing an existing private practice. The current owner, Dr. Eschbach, would be happy to consult with the purchaser and assist with the transition. The owner is planning retirement within the next few years. Serious inquiries only please. Please send a letter of interest via email to nwneuropsych@sbcglobal.net. Please type in the subject line NNI Office Condo / Practice Purchase Inquiry.

Bruno Law Office

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EDWARD F. BRUNO, J.D., LL.M., formerly counsel to
Department of Professional Regulation
Illinois Medical Disciplinary Board

JOSEPH E. BRUNO, J.D.

ATTOREYS WHO REPRESENT PROFESSIONALS

Defense of Licensure Actions
Confidentiality Issues
Impairment and Rehabilitation
Tax Audits and Appeals
Third Party Reimbursement

Ethics Consultations Available for IPA Members

While the IPA Ethics Committee has discontinued any adjudication function, the Committee will continue to offer individual telephone consultation to IPA members on ethical issues. Members can access this service by contacting the IPA office at 312/372-7610 x201. Other educational functions provided by the Committee include ethics presentations, workshops, and seminars for psychologists, agencies, and academic programs. Contact the IPA if you are interested in arranging such programs.
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“Guilt is a luxury that we can no longer afford. I know you didn’t do it and I didn’t do it either, but I am responsible because I am a human and a citizen of this country and you are responsible for it, for the very same reason.”
—JAMES BALDWIN

Before the COVID-19 isolation orders the Social Responsibility Section (SRS) and Section on Ethnic Minority Affairs (SEMA) planned to host a two-hour program to build awareness, relationship and commitment to social justice causes, “ARC”.

Please go to the website for Frances Causey’s award-winning Documentary Film, "The Long Shadow" to increase the breadth and depth of participants’ awareness of the ongoing legacy of the seen and unseen systemic racism effecting African Americans in the USA: http://thelongshadowfilm.com/

Some other recommended resources include:

**Psychological References:**


**PLEASE especially note Chapter 4 by Shelly P. Harrell, “Compassionate Confrontation and Empathetic Exploration: The Integration Of Race-Related Narratives In Clinical Supervision” which has a lot of our presentation content and some great Summary Tables.**

**Sociology & Social Psychology References:**


For Personal Awareness Building and Taking Action:


**PLEASE note that this book is set up as 28 exercises, largely journaling, for your own growth and decisions for action.**


After viewing “The Long Shadow” you will be able to better use the data and case studies as presented in the documentary film to:

- Draw connections between “the peculiar USA Institution of Slavery” and current race relations.
- Define & identify examples of "systemic racism" and “implicit bias”.
- Begin to identify possible paths toward racial equality.
- Begin to Identify some organizations and opportunities to work toward racial equality

Thus, you will be more ethno-culturally aware of the realities facing many—many African Americans. ■
Happy Spring (finally!), fellow SOGI Section members! In addition to my IPA responsibilities, I also have been serving on the APA Council of Representatives, and wanted to share some SOGI-related and exciting developments from APA Council’s most recent meeting on February 28-March 1, 2020. Although Council’s agenda was relatively light compared to other meetings, it was not light on LGBT-related content. In fact, there were 3 agenda items specifically related to sexual orientation and gender diversity that received enormous, and sometimes unanimous, support. Specifically, APA Council passed resolutions on supporting sexual/gender diverse children and adolescents in schools; opposing discriminatory laws, policies, and practices aimed at LGBTQ+ persons; and the need to affirm gender non-conforming and transitioning youth. This is an example of the good that APA can do, and more broadly what professional associations can do for the good of the public. In other words, we can make a difference!

For more information about the Section, please contact me at drderekphillips87@gmail.com or Dr. Van Serke, Associate Chair, at hvanserke@gmail.com.

Please see below a list of recent and upcoming SOGI activities and stay tuned for more!

Recent and Upcoming SOGI Activities:
• A new, SOGI-specific listserv has been created and is now operational. Make good use of it!
• SOGI-related resources have been added to the SOGI section of the IPA website.
• A motion to change the Section’s name to "Sexual Orientation and Gender Diversity (SOGD)," will be presented at the next IPA Council meeting in April 2020.
• SOGI and the Section on Ethnic Minority Affairs (SEMA) are partnering to co-sponsor an event related to best clinical practices with LGBT, particularly transgender, patients.

IPA Executive Director Message... Continued from page 9

drashleyhouchin@gmail.com or Assistant Chair Rachael Sytsma rachael.sytsma.psyd@gmail.com.

It has been truly moving to see our members supporting each other during these times. Thank you so much.

We are IPA Strong! I hope you will continue to support the organization that is there for you! As always feel free to contact me if I can be of service to you. 312/372-7610 x201 or mkarey@illinoispsychology.org.

Stay well!
At this March 2020 juncture, America is now under a state of emergency due to the rapid international expansion of the Covid-19 virus. Almost overnight, psychologists are faced with an acute need to learn and develop competence in Telepsychology. And, this includes many senior psychologists, in the 9th inning of their career, who had no intention of ever operating via telehealth mode.

No one ever imagined the virtual overnight threat from a microscopic virus to both one’s physical well-being, and to one’s practice. When you do good work, the practice thrives, right? Yet today, palpable anxiety pervades our profession due to Covid-19. How will the office overhead get paid? What if I am quarantined? How will I continue to provide services to Medicare patients who commonly lack experience in technological arenas? What must one do to continue to treat the children, yet maintain confidentiality for them using telehealth?

When Nassim Taleb published the Black Swan in 2010 he outlined a parallel to what practicing psychologists are experiencing in 2020. The book became a NYT bestseller, describing rare unpredictable events that are beyond what is normally expected and have potentially severe consequences.

In this crisis, which threatens continuity of patient care along with sustaining an income, one imagines the insurance companies only care about their own profits. Given our national emergency, it may seem justifiable to some to “flex” insurance rules out of desperation, fearing their practice may be decimated. Some may be tempted to use invalid codes, or to not indicate a service as being telehealth or just a phone call to a patient. Danger. The crisis we all live in right now will end. Of course, it’s tempting to flex the billing rules; a better question may be—is it worth it in the long run? The most common CPT code modifier used in billing to payers to indicate telepsych services is “95”. Any psychologist who is quarantined due to Covid-19 would be justified maintaining telephone contact with patients, the question is: will you ultimately be paid? Please—don’t bill payers for remote sessions as if services were delivered in person at your office. This crisis will end, and deceptive coding can expose providers to licensure issues. If that would happen, today’s crisis will never be over.

Psychologists who anticipate doing ongoing Telepsych will need training ASAP. It is understood that many providers who decide to do Telepsych have gotten in over their head when training is lacking. Both IPA and APA have created resources for training. Psychological testing publishers will also offer guidance about online testing [where a moderator might proctor the exam].

The APA sponsored a Telepsych 101 series with a national Telepsych expert during the fall of 2019, presented by Marlene Maheu PhD. During the 4-week webinar series she emphasized not all patients are appropriate for Telepsych. As examples Dr. Maheu identified the: highly depressed, severely anxious, or psychotic patients may not be appropriate, along with chemically dependent or acting out individuals.

Safety issues also need to be understood: what if the patient has firearms in the home, or, if a patient shows up for a Telepsych appointment and is inebriated? What do you do when you are working remotely? These are good examples of the importance of training. Dr. Maheu felt it was important to document why Telepsych is being used vs. in office care. Given the current national crisis, clinical judgments will be more critical than ever. However, social distancing remains a potent offset to the spread of the virus.

The Black Swan, Uncharted Waters in Practice
Patricia Farrell, PhD, Clinical Practice Section Chair

“Dealing with the frustrating problems that get in the way of your doing your job IS your job.”

RANDOM CORTICAL ACTIVITY
Sandy Marcus, PhD
Maximizing the Impact of State and Federal Advocacy: 2020 APA Practicer Leadership Conference

Fahad Khan, PsyD, IPA Legislative Committee Co-Chair

The annual Practice Leadership Conference (PLC) sponsored by the American Psychological Association (APA) was held in Washington, DC from March 7-10. A team of delegates from Illinois was invited to attend the PLC. This included our Executive Director Marsha Karey, President Kalyani Gopal, Diversity Liaison-Elect Erin Alexander, Diversity Delegate Fahad Khan, Rural Health Coordinator Jeffrey Kellogg, Federal Advocacy Coordinator Terrence Koller, and Beth Rom-Rhymer. The theme of the year PLC was “Maximizing the Impact of State and Federal Advocacy.”

PLC brings together psychologists from state, provincial, and territorial psychological associations across US and Canada. They are joined by the APA governance and leadership as well. It serves as an opportunity to network with others, converse about professional issues such as association management, challenges, and trends. It also provides an opportunity for psychologists to take important issues to the Capitol Hill and lobby on behalf of the field of psychology and the public. It is filled with opportunities for leadership and direction for those who want to make a greater impact.

Many issues are discussed at the PLC through workshops and plenary sessions, such as legal and ethical issues pertaining to professional practice, overview of the political landscape in Washington, DC, diversity and inclusion issues, and leadership development. On the final day of the conference, psychologists lobby on the Capitol Hill.

This year three issues were presented to the legislators by the psychologists attending PLC. First was the ongoing issue pertaining to the physician definition in Medicare where psychologists are the only doctoral level providers not included in the definition. This creates barriers in providing services, especially to the vulnerable elderly population. Second issue was related to the proposed Medicare cuts by Centers for Medicare and Medicaid Services (CMS). CMS has proposed a 7% cut to reimbursements made to psychologists for services rendered and PLC attendees asked the legislators to ask CMS to not make this cut.

Psychologists are already one of the lowest paid professionals by Medicare and this would increase that gap and discourage providers to take on Medicare clients. Lastly, psychologists lobbied to increase funding for two major programs that help graduate psychology students; the Graduate Psychology Education program and the Minority Fellowship Program.

Even with the Coronavirus scare, this was a successful conference and overall a constructive trip. The Illinois delegation was able to meet a dozen legislators or their staff members to explain the above issues. Whether or not they will follow through, will also depend on local psychologists making the effort to visit the district and state offices. If you feel passionate about matters pertaining to our field and our clients, please visit your legislators and help them understand the importance of these issues. IPA is available to help guide and mentor you to make your meeting a successful one.

IPA Meeting Schedule

IPA Executive Committee Meeting will be held at 3 PM on April 24th, May 15th, 2020.

IPA Council Meetings will be held at 9 AM on Saturday’s, April 25th and June 20, 2020.

IPA Legislative Committee Meetings will be held at 2 PM on April 24th, May 15th, 2020.

IPA All Association Annual Meeting will be held at the 2020 Convention of the Illinois Psychological Association—Thursday, Friday and Saturday, November 12-14, 2020.
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IPA email: tkoller@illinoispsychology.org

* A Legislative Advocate is trained to meet his or her legislator. After a relationship is established, the psychologist contacts the legislator when issues relevant to psychology arise.

Beyond Federal Parity...
Continued from page 17

of generally accepted standards of care as supporting evidence of medical necessity. There is no single source of generally accepted standards of care. Rather, they can be gleaned from multiple sources, including peer-reviewed studies in academic journals, consensus guidelines from professional organizations and guidelines and materials distributed by government agencies.¹

The 3rd element for appeal letters is stating the decision is “noncompliant with MHPAEA and explain why—draw the connection between overly restrictive guidelines and a violation of the parity law. One example: the record is replete with evidence that UBH’s [or XYZ insurer’s] guidelines were viewed as an important tool for meeting utilization management targets and mitigating the impact of the 2008 Parity Act.”¹

Additional elements for parity types of appeals can be found and utilized. The National Council for Behavioral Health appeals toolkit can be downloaded and accessed at: https://www.thenationalcouncil.org/wp-content/uploads/2020/02/021020_NCBH_WitParityToolkit_v8.pdf

Earlier in the year we informed you that we would be compiling a virtual Resource Center that psychologists and their family members could go to for a list of providers of treatment services for professionals coping with mental health or addiction issues that impact their work or family life. If you are providing such services or know of a colleague or quality program/facility where such services are provided, please complete the survey below. From the data we receive, we will be developing a resource data base which could be utilized by psychologists seeking assistance, concerned colleagues, or family members.

We will also be posting this survey on the IPA web site and will have it available at the “Taking Care of Yourself...” presentation at the IPA Convention in November. Once we have our resource list it, too, will be posted on the web site and also shared with the APA Committee on Colleague Assistance. Thanks for your involvement in this project and your input.

Dear Colleague,

Please complete this brief survey to let us know your experience and expertise in working with psychologists and their family members. As you know, working with a professional or person in a high accountability or a safety sensitive position brings with it some unique challenges. When the individual is also a mental health professional, there are even more considerations in providing accessible, confidential and effective psychological and addiction services. Help us provide a comprehensive resource list for Illinois psychologists and their family members who may be experiencing some distress.

Please duplicate this form for other colleagues who might be interested in treating psychologists and other mental health professionals with personal issues, including those whose work is impacted. If you have been pleased with programs that treat professionals or work in one, please fill out a form for such facilities, as well.

Thank you,
IPA's Colleague Assistance Resource Program
Co-chairs: Cliff Saper, Ph.D and Ellen Stone, Psy.D.

### Resource Provider/Program Profile

Date: ___________ Name/Program:  ____________________________________________________

Professional Credentials/certification:  __________________________________________________

Organization: ________________________________________________________________________

Primary Address:  _________________________ Additional Locations:  _____________________

City, State, Zip:  __________________________ City, State, Zip:  __________________________

Office Phone:  ____________________________ FAX:  ___________________________________

Email:  __________________________________ Website:  _______________________________

Payment arrangements accepted: (Check all that apply).

- Sliding Scale: ○  Private Pay: ○  Medicare: ○  Medicaid: ○  Tricare: ○

Name all Health Insurances accepted:  __________________________________
**Type of Service:** (Check all that apply).

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<td>Attention Deficit Hyperactivity Disorder (ADHD) ; Autism-Spectrum Disorders ; Axis II Dx ; Chemical/Substance Dependency and Alcoholism ; Children ; Codependency ; Compulsive Gambling/Spending ; Divorce ; Domestic Violence ; Dual Diagnoses ; Employee Assistance Counseling/Consulting ; Eating Disorders ; Family Therapy ; Grief/Loss ; Group Therapy ; Internet Addiction ; Intervention Services ; Self-Injury ; LGBT Concerns ; Medication Management ; Men’s Issues ; Mood Disorders ; Pain Management ; Psychological Assessment ; Sexual Issues/Disorders ; Smoking Cessation ; Trauma ; Veteran’s Issues ; Women’s Issues ; Others: ____________________________________________________________________________</td>
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</tbody>
</table>

Please write a brief statement, one or two paragraphs in length, about the approaches you use in providing services to psychologists and their family members. You might wish to include information about your experience, background, and philosophy of treatment.

Email form to clifton.saper@alexian.net
Fax form to:
Dr. Saper at 847/755-8508
Mail form to:
Illinois Psychological Association,
67 East Madison St. Suite 1817, Chicago, IL 60603

*See the following page for a Healthy Lifestyle Assessment.*
Healthy Lifestyle Assessment

Sometimes our work becomes too important in our lives and our clients/patients or our students become our main source of social contact. Without our knowing it, we can find ourselves in a "closed system" contributing to diminished self awareness, susceptibility to boundary violations with our clients and feelings of "burnout."

The following are some statements you can use to analyze your level of self-awareness and balance of work and life. If you come across a question that gives you an uneasy feeling, note it as something for further exploration. Develop an action plan as you would for a client/patient. Then make a commitment to revisit the item, say in 30 days to measure your progress. The greater number of low scores you indicate, the greater the need for concern.

<table>
<thead>
<tr>
<th>PLEASE RATE THE FOLLOWING 1 = Strongly Disagree thru 5 = Strongly Agree</th>
<th>Rating</th>
<th>Action Steps</th>
<th>Follow Up Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. I have mostly healthy relationships with family, friends, and colleagues.</td>
<td>1 2 3 4 5</td>
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<td>2. I exercise regularly (at least 30 minutes/day, 5+ days/week).</td>
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<td>3. I do not smoke or use other substances as coping mechanisms.</td>
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<td>4. I eat 4-5 servings of fruits and vegetables per day.</td>
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<td>5. I maintain a healthy weight (below 24 BMI).</td>
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<tr>
<td>6. I have adequate time for leisure and participating in activities I enjoy outside of work.</td>
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<td>7. I am comfortable with my religion/spirituality.</td>
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<tr>
<td>8. I feel that I have control over the future of my career.</td>
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<td>9. I stay current on the latest data and trends in my field.</td>
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<tr>
<td>10. I feel in control of my behavior and emotions.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>11. I have sufficient support through a network of my peers.</td>
<td>1 2 3 4 5</td>
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<td>12. I believe that I maintain healthy boundaries with my clients/patients/students/Professors/Supervisors/peers.</td>
<td>1 2 3 4 5</td>
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<td>13. I feel adequately prepared to manage work challenges.</td>
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<td>14. I am comfortable in crisis situations.</td>
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<tr>
<td>15. I have adequate support to deal with my own or a close family members’ chronic illness.</td>
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<tr>
<td>16. I have ample help with child/elder care.</td>
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<tr>
<td>17. I am engaged in an appropriate amount and level of professional activities (so that I am not over/under-whelmed).</td>
<td>1 2 3 4 5</td>
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<tr>
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<td><strong>1 = Strongly Disagree thru 5 = Strongly Agree</strong></td>
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<tr>
<td>18. I receive adequate rest (6-9 hours per night).</td>
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<tr>
<td>19. I am able to maintain my presence in my daily work rather than planning what I’ll do after work or over the weekend.</td>
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<tr>
<td>20. My schedule is well-balanced.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>21. I hold myself to an adequate amount of breaks.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>22. I recently said “no” to adding something to my plate.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>23. I plan less critical tasks (paperwork, returning phone calls) during the times of the day when I don’t feel I work at my best.</td>
<td>1 2 3 4 5</td>
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<td>24. I am free of habits such as gambling, pornography, video games, or other compulsive distractions.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>25. I enjoy my work more than I am burdened by my career path.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>26. I have been able to take one or more days off from work to relax in the past 6 months.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>27. I am unbothered by my professional behavior. For example: I act ethically and in ways that I am proud of; I do not behave in any way that I feel I have to hide, cover up, or explain.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>28. I call in when I am sick.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>29. I have a trusted peer or mentor to provide me with honest feedback in case my personal life begins to interfere or affect my work (e.g., financial problems, conflict at home, love, personal or family illness).</td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
</tr>
<tr>
<td>30. I self-disclose appropriately. That is, I disclose only the type and degree of information that is in the best interests of clients/patients/students/Professors/Supervisors/peers.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>31. I am able to let go of my work and not allow related concerns to interfere in social or personal activities.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>32. I stop to eat lunch and not work while eating.</td>
<td>1 2 3 4 5</td>
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<td>33. I engage in regular positive experiences (e.g., reading the paper, taking a bubble bath, going for a walk, or spending time outdoors).</td>
<td>1 2 3 4 5</td>
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<tr>
<td>34. I don’t suffer from headaches, stomachaches muscle aches, or problems sleeping that have no medical explanation.</td>
<td>1 2 3 4 5</td>
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<tr>
<td>35. I do not participate in excessive use of alcohol or illicit substances.</td>
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Continued on page 32
Healthy Lifestyle Assessment  Continued from page 31

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<tr>
<td>36. I seek nurturance from friends, family and loved ones outside of the school or office in order to minimize locking myself into a &quot;closed system.&quot;</td>
<td>1 2 3 4 5</td>
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</tbody>
</table>

Scoring:

160-200 Congratulations, you may be a good role model for your peers! Maybe you wish to offer a seminar on balance and self-care for the rest of us?

120-159 O.K. you’re doing pretty well in most areas. You may want to take a look back over the questionnaire and identify some items that may need some attention.

80-119 Thank you for being honest. You are probably feeling pretty distressed and possibly overwhelmed. Would talking with a supervisor or other professional colleague be of help to set some self-care goals?

79 or below Take care of yourself, there are quite a number of items that need addressing. Self-care is an option but a requirement in order to be successful in helping others as well as yourself.

References

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FOR S/HE’S A JOLLY GOOD FELLOW

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1. Member of IPA for at least seven years
2. Made outstanding contributions in the field of psychology
3. Nominated for Fellow status by two members of IPA who have submitted written endorsements
4. Elected to Fellow status by a majority vote of the IPA Council of Representatives

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Attach Additional Sheets for Supporting Information

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Mailing Address: ____________________________________________________________________________________________
Email Address: _____________________________________________________________________________________________
Phone(s): _________________________________________________________________________________________________
IPA Membership Status: ____________________________________________________________________________________
Number of Years as an IPA Member: __________________________________________________________________________
Sections in which Membership is Held: _______________________________________________________________________

Educational History (include undergraduate, graduate and postdoctoral institutions):
_________________________________________________________________________________________________________

A high level of competence or steady and continuing contributions are not sufficient to warrant Fellow status. Fellow status requires that a person’s work have had impact in the field of psychology on the local, state, regional or national level. A detailed statement demonstrating this impact must accompany the Fellow application. PLEASE NOTE THAT SUBMISSION OF A VITA ALONE WILL NOT BE CONSIDERED A SUFFICIENT RESPONSE.

For your statement, please describe in detail your outstanding contributions in any of the following ways (this list is not intended to be exhaustive).

Public Service: Describe exact nature of services performed, dates, names of community organizations

Service to the Profession: List offices and/or committee memberships held, dates, names of professional organizations, explanation of specific services performed.

Scholarly Contributions to the Profession: List publications in accordance with APA editorial style for reference lists.

Each application should be accompanied by an application fee of $100. Checks should be made out to Illinois Psychological Association and mailed to:

Fellow Application
Illinois Psychological Association
67 East Madison Street, Suite 1817
Chicago, Illinois 60603

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Phone: 312/372-7610
Fax: 312/372-6787

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Marsha Karey
mkarey@illinoispsychology.org

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www.ngsmedicare.com

American Psychological Association
800/374-2721
Web Page
www.apa.org

Medicaid Number Application
http://www.illinois.gov/hfs/impact/Pages/default.aspx

Chicago Office of Healthcare Access
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