

Jennifer Verraneault

Testifying in favor of H.B. 5836 and S.B. 16

Thank you for the opportunity to speak before you today. For those of you who are not aware of the problems that exist in a cottage industry in this state, I would like to bring to your attention the aspect that is affecting the mental health of families within the divorce industry. I do not claim to be an expert in insurance especially when it relates to behavioral health, however, I can recognize when an industry is taking advantage of individuals and families when they are the most vulnerable. I can also conduct research in order to back up my observations. My testimony today is intended to shine the light on therapists licensed by the state of Connecticut to provide mental health services to our residents and do not allow them to utilize their behavioral health insurance benefits for their services. There's a population of mental health professionals associated with Guardians Ad Litem, Family Attorneys and Judges who have a constant reservoir of referrals flooding into their private practices across our state. When a family is going through a high conflict divorce or child custody dispute, a referral to a mental health provider will often be made to help the members of the family. This will typically begin with a co-parenting therapist for mom and dad, a custody evaluation for the entire family, which is no more than a psychological evaluation to determine any mental health issues. After reading many of these court ordered psychological evaluations, they all have the same theme; some sort of mental health issues. I am not suggesting these individuals have deep rooted emotional conditions, but they're often times situational. When these referrals do not work, the family will then be referred to another layer of therapeutic services/providers within

this cottage industry. By the way, when a family arrives at one of these many private mental health providers who are licensed through the state of Connecticut, they learn very quickly that the services they intended to have provided are not actually being provided. In fact, their services are being called "resources" or "coaching" or "consulting" but not therapy. The problem I see is that these families are in crisis and they need mental health services, however, the population of mental health providers I am referring to in my testimony will not call it what it is so that they do not have to have anything to do with insurance. This is WRONG! They're either providing therapeutic services or calling coaching or they're not providing therapeutic services and this is what these families need. When I sat on the Task Force to Study the Care and Custody of Minor Children in Legal Disputes, we had two mental health providers on our panel whom could not agree whether these families referred to them by family court are experiencing anxiety, depression or any other host of mental health issues as a result of their high conflict divorce. I was very happy to hear one Yale Graduate call it what it was; therapy and very disappointed by the other who said it would be insurance fraud because her services were providing resources to these families. When I participated in the Guardian Ad Litem training in 2012, I learned from the panel of judges and mental health professionals conducting the training that high conflict cases typically involve mental health issues. This doesn't mean they have been diagnosed but it was clear that everyone involved with these cases recognize this probability from their years of experience. I would like to ask this committee to please address this issue. We need to understand why this group of mental health providers associated with the divorce industry will not allow families to utilize their insurance benefits. Could it be that they do not want to have any accountability? Could it be

that they do not want to provide their tax identification number to insurance for income tracking purposes? This has been raised by hundreds of families having been subjected to this group within the divorce industry suggesting that tens of thousands of dollars are not being reported to the state of Connecticut. I don't know why this is. I do know that I have spoken to many mental health providers not included in this cottage industry who cannot believe this is going on. I believe the people have the right to choose their mental health providers. I believe the people have the right to interview mental health providers because not everyone is a fit. If we want to help families in crisis the power needs to be given back to them. We're talking about families caught up in this cottage industry spending upwards of \$75,000 dollars in therapy. I look to your committee to close this private contract loop hold with insurance. I have spoken with various insurance companies and I have provided Aetna's outline as it relates to family therapy. This is what these families need in family court; family therapy. They don't need resources or consulting. They need to learn the skills to cope with the crisis they are experiencing at that very moment. We heard testimony by renowned Licensed Marriage and Family Therapist Linda Gottlieb and physician Steve Miller affiliated and trained by Brown and Harvard University that what is going on with these mental health providers within family court is wrong and in many cases fraudulent. Please put an end to this.

This is a psychologist whom is the "go to" guy in Connecticut Family courts. He has made hundreds of thousands of dollars on families with no allegations of abuse or neglect. Guardians Ad Litem and Judges don't know what to do with disagreeing parents so they funnel these parents off to Dr. Sidney Horowitz and subject these parents and children to psychological testing. His work is nothing more than a fishing expedition at the emotional and financial expense of children and their parents.

This guy feels so untouchable that he had the audacity to put in writing that he charges for "thinking" at \$325 per hour and then goes so far as to writing "shame on you" to an attorney for questioning him for charging a family for providing the name of a second reunification therapist. This is after Horowitz was paid \$3,000 to evaluate three alienated children to see if they are resilient enough to enter into therapy with their father and to provide a therapist name. He wanted another \$1625 to come up with another name - for a referral! He does this because the judges allow it!

Dr. Sidney Horowitz feels so comfortable not only charging families for "thinking" but what's even more disturbing is that he feels at ease putting it in writing. When he sent his reply to this fathers attorney, Horowitz was rubbing shoulders with the then Chief Administrative Judge Lynda Munro attending an AFCC convention in California in May 2013. This family court system has become a chummy cottage industry. This guy understands the meaning of extortion. This is one of many examples of this "go to" guy for Judges and GALs taking advantage of good parents and their children and their mental health. None of these families are able to use their insurance benefits.

April 25, 2014 - Why HB No. 5836 and SB No. 16 need to be passed

SENATOR COLEMAN:

Madam President, just very briefly.

I know that it's already been done and said by others, Senator Kissel and Senator Fasano among those others, but it would be remissive of me not to commend Bill O'Shea, who is not only on this issue but on many other issues, is a very hard working and dedicated and helpful LCO attorney.

Additionally, Mike Cronin contributed mightily to this effort and the representatives of the Judicial Branch, including Judge Carroll and Judge Solomon, Judge Bizuto, and Deb Fuller, and finally, once again, Minnie Gonzalez has been a champion.

And I also want to congratulate all of the people who came together in coalition to be advocates for this initial step at reform and I want them to all know that they have made a difference. Thank you, Madam President.

SENATOR WILLIAMS:

Thank you, Madam President.

I rise to support the amendment and I will not go over some of the subject points that have already been addressed. I rise really just to thank the members of the public who shined a bright light on a very significant problem. And because of their efforts, that is being addressed today and I want to thank them for their courage and persistent in coming forward.

I want to thank very much Eric Coleman, our Senate Judiciary Chairman; Senator Kissel, the ranking member; and all those who contributed to this effort, including Representative Minnie Gonzalez, who was here earlier. And finally, I want to recognize Senator Fasano, who took it upon himself to work very hard on this issue and to work with parties to resolve issues and to facilitate the passage of this and quite frankly, Madam President, to facilitate the consideration of the Judges in a timely manner as well.

So Senator Fasano, thank you very much for your very good work on this bill and the issues involving the bar in general. Thank you.

SENATOR MCKINNEY:

Thank you, Madam President.

I thought for a second I was going to get one chance before I left to go after Senator Williams. Maybe that day will come.

Madam President, I -- I have to thank those people, or at least some of them, who have worked so hard on this, even though they've been thanked many times. Because as I came into this -- my last session in the State Senate, this was the only bill I wanted to see pass and I am so happy that we are here today.

I think we have a lot more to do. I said earlier I think this is positive steps in the right direction, but still -- still falls short of where we will be to reform what is a system that needs a lot of change.

So I want to thank Senator Coleman as Chairman of the Judiciary Committee, Senator Kissel as the ranking member. I want to thank my friend, Senator Fasano, who is now a tradition in the last several weeks of sessions who locks himself in his office with a group of people to make sure something important gets done and he has spent countless hours making sure this gets done.

I want to thank Representative Fox and Rebimbas, the Chair and ranking members down -- actually, I don't know if she's a ranking member, but I know she's been working -- is a ranking member down in the House. And also Representative Gonzalez.

I was wondering whether or not this bill would be taken up in the House, but then I remembered, I'd feel sorry for all of the House members if they don't, but she has been not just an advocate. She's been a friend to people who have been mistreated by the system, quite frankly. She's been a constant source of support for many.

I want to thank at least two people. One gentleman by the name of Tim Critler, another woman by the name of Marisa Ringel, who came to testify on several occasions before the Judiciary Committee, who are people I've known since I was born from Fairfield. People just like me and you and everybody else who have been caught up in the system.

I don't really want to talk about what the bill does, Madam President. I don't want to be long. I -- I just -- I don't think I'm any different as any other parent. I am divorced.

My kids are three kids of divorced (inaudible). I don't really want to talk about my personal life, but I -- I could not imagine going a day or a week without seeing my kids. My oldest is going to college in September; I'm a mess just thinking about the fact that I'm not going to see him all the time.

And yet, we have a system that has allowed mothers or fathers to go years, years, without seeing their kids. And we're not talking about keeping kids away from abusive or neglecting or potentially dangerous parents. We're talking about keeping kids away from parents who love them, who need them, but because of various reasons of not getting along with former spouses, are denied the right to see their kids.

And the kids lose in every case because there isn't a kid out there who should need and have a relationship with their mother and the father, whether they're married or not.

I don't think the blame falls on one group or the other. I think the judicial system, I think the GAL system, I think the Legislature, and yes, I think parents all share in this system that has fallen apart. But -- but I hope that future legislators and future legislatures will -- will remember, if they have kids of their own, will ask themselves what would I do if I couldn't see my kids for a couple of months? What would I do if was denied the right to see my children for years?

I am amazed at the composure and the (inaudible) of the parents who come up to testify before the committee who haven't seen their children in years. I -- I don't know what I would do. And that -- that, beyond all of the pieces of this bill and the protections and all of that, the very fact that we have a system that has allowed this to happen is something that we all need to be determined to fix.

I don't know if this will fix the problem completely. In fact, I don't think it will, but I think this is going to be a very good start to get us to the fix. I know the Judicial Branch cares about this at the highest of levels and they want to make sure they can resolve it. And I believe that their efforts will go a long way.

So I just wanted to really thank all of those people who came to the Capitol, came to the Legislature, time and time again, to advocate. I want to thank the members of the Judiciary Committee, who sat through days and nights of testimony to make sure that all of those people who knew that the judicial system

had let them down were here to know that the Legislature was not going to let them down. And by listening to them and hearing them out, I think they sent a very strong message that we won't let you down.

And this bill sends the message that we're not going to let you down. We're going to try to help you solve the problems that the judicial system has yet to solve.

So I just -- to me, for me, this is a proud moment because I just can't imagine anything worse than separating a parent from their child and we're going to try to make sure that that doesn't happen again.

Thank you, Madam President.

SENATOR LOONEY:

Thank you, Madam President.

Speaking in support of the -- the amendment, and I certainly want to commend Senator Coleman and Senator Fasano, Senator Kissel, for their hard work on this and the negotiation that went on to bring this amendment before us.

And I think Senator Fasano and his comments really focused on -- on a key issue that -- that is, I think, the concern among many parties, that in -- that in many cases, a guardian ad litem, in some cases, seem to be almost reflexively and automatically appointment in certain cases by -- by the court.

And partly, that was driven by the fact that as we see in more cases, one or -- or in many cases now in divorces, both parties are self-represented, pro se. And I think in some of those cases, the Judges came to be concerned that there needed to be an attorney involved somehow in the case and would be more likely to appoint a guardian ad litem in those cases. In -- in some ways, almost reflexively or automatically.

What this -- the key language in this amendment provides is that there will be more -- more thought and consideration to go into that process before the parties are burdened with that -- with that cost.

And the key provisions, lines 83 and thereafter, in the absence of an agreement of the parties to the appointment of counsel or a guardian ad litem for a minor when the parties matter and a

canvassing by the court concerning the terms of such agreement, the court shall only appoint such counsel or guardian ad litem under the section when, in the court's discretion, reasonable options and efforts to resolve a dispute of the parties concerning the custody care, education, visitation, or support of a minor child have been made.

Meaning that there will have had to have been an examination and a significant good faith effort to try to resolve those issues prior to the appointment of a guardian ad litem. But it will not be the kind of automatic default position. It will only be done at a point where the parties' disagreements are so irresolvable and the parties are so intransigent that the Judge sees no other option to the appointment of a guardian ad litem in these circumstances.

And I think that that in itself is a significant way of putting some controls on the system and the perception that in some cases, people are burdened -- being burdened with costs that are -- are more than was necessary to -- to resolve the issue at hand.

So I think that this -- this amendment really does address the -- the core of the problem as it has been perceived and articulated and certainly urge adoption of the amendment. Thank you, Madam President.

SENATOR FASANO:

Good evening, Madam President.

Madam President, I support the -- the amendment and I would be remiss unless I did a few of the thank you's and maybe some of it's repetitive. Senator Coleman for his leadership; Representative Fox for his leadership; Senator Kissel for his; Representative Rebimbas; Representative Minnie Gonzalez, who's in the back of the room, for her consistency and -- and challenging the system and questioning the system; Judge Carroll Judge Solomon, Deb Fuller, all from the court; Bill O'Shea at LCO; Mike Cronin who did a great job in running amendments around and making sure people were aware of what's going on; (inaudible) stay plugged in.

But there are other people who were not associated with the legislative process who also have to be thanked. Some people who suffered through the GAL process and led them to begin this advocacy almost two and a half years ago, Jerry Mastrangelo,

who's up in the gallery, and Jennifer Verraneault, who's up in the gallery. Peter Szymonik, did I say it right? Szymonik. Very close. Thank him for his advocacy and his e-mails.

Because people can make a difference and sometimes people think that their voices go unheard. Well, we heard it. We heard it. And if you don't tell us, we don't know. And what happened in this case was back about 18 months ago, Jerry and Jennifer organized to get together in North Haven, where 150 to 200 people showed up. And not stories that they lost the issue or they lost the case, but stories that showed the inherent unfairness in the system, a system out of control.

Who is blamed for this system out of control? We are. We were. I would suggest the family bar is also to blame. I would suggest Judges are to blame. And the system got so out of hand it took the people from the outside to come and tell their stories. As stressful and as emotional as they were, they came and they told their stories.

And I think this body and the Judicial Branch came and said let's sit down and see what we could do. Clearly, this bill is the beginning, but what has it done? Let me tell you. No longer do you have to worry about two lawyers who get together and say you know what? Let's just get a GAL. We'll convince our clients to get a GAL and we'll get that GAL in there and then they can make some money and we'll let them deal with the issues.

Now, a Judge canvasses and says you understand -- you're hiring a GAL. Do you understand the terms of the agreement? Do you understand that you're hiring because the both of you can't agree as to all these topics? And because you can't agree, it's coming out of your pocket.

That never happened before. You never had a right to get rid of a GAL before. Now, you do. You never knew what the system was doing to you. Now, you've got some rights in the system, and that's how it should be.

We heard stories where people were driven to bankruptcy, literally, to bankruptcy, where every asset could be taken to pay a GAL fee. I don't know another lawyer's fee that ever gets treated with that much power. The power of the Superior Court to say I am taking your pension plan. I am taking every dollar you have in the bank. Never happens. We did it for GALs and it got a system that went out of control.

What does this bill do? This bill protects those assets that this body believed were worth protecting when there were judgments against you. So you can't touch that college fund, you can't touch that pension plan, you can't take 100 percent of that house, you can't take their pension plan, you can't take their Social Security check, and you got to leave them \$ 1,000 in the bank so they could put food on the table for the kids that you're trying to protect and pay medicine by the deductible for the kids you're trying to help. You can't drive them to where they got to go on the streets.

Think about the policy that ran amuck until we got involved. And I should say, too, we got involved until they told us what was wrong with the system.

Madam President, I think that this bill does carry with it the items I suggest, but more importantly, I hope that the message to the Family Bar Association and to Judiciary is this is a big step. There are a lot of other things we'd like to see that's not in this bill, cap on a -- on GAL fees, travel time not being charged on a GAL fee, but what we're going to do at this point is say we've gotten a good start, but we're watching. We don't like to interfere that much and we don't like to interfere with our equal branch. But we will where there's a need and we will when we see abuse.

I want to thank the Judges -- the Judges office for sitting down with us and listening to us. I want to thank them for working with us to get this bill. But the spotlight is on. We are going to be watching. We are going to be listening. And those advocates who are listening to this now, who are here today, who are watching on CTN, our ears are open and they will be on this issue for a long time to come.

Let's keep watching it. This is a good step and I look forward to passing this bill. Thank you, Madam President.

SENATOR MCLACHLAN:

Thank you, Madam President.

Thank you, Senator Coleman, for all of your work on this and I think Senator Kissel has done a good job trying to be sure that everyone who worked hard on this is recognized.

But I must say that Senator Fasano in the Republican Caucus and -- and Attorney Cronin I know have put a lot of time into it.

I'm just grateful that everyone who voiced their opinion on this difficult topic did so and all of the constituents who chimed in loud and clear.

It does appear that there are certain aspects of this proposal some will think didn't go far enough. I think that this is a terrific response to where we were yesterday and I look forward to a successful implementation of this new process for guardians ad litem in Connecticut. Thank you, Madam President.



## Family Therapy

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### Treatment Overview

Family therapy is based on the belief that the family is a unique social system with its own structure and patterns of communication. These patterns are determined by many things, including the parents' beliefs and values, the personalities of all family members, and the influence of the extended family (grandparents, aunts, and uncles). As a result of these variables, each family develops its own unique personality, which is powerful and affects all of its members.

Family therapy is based on the following concepts as well.

- Illness in one family member may be a symptom of a larger family problem. To treat only the member who is identified as ill is like treating the symptom of a disease but not the disease itself. It is possible that if the person with the illness is treated but the family is not, another member of the family will become ill. This cycle will continue until the problems are examined and treated.
- Any change in one member of the family affects both the family structure and each member individually.

Health professionals who use the family systems model in caring for people always consider the whole family. They view any problem in one member as a symptom of change or conflict in the group.

A family therapist:

- Teaches family members about how families function in general and, in particular, how their own functions.
- Helps the family focus less on the member who has been identified as ill and focus more on the family as a whole.
- Helps to identify conflicts and anxieties and helps the family develop strategies to resolve them.
- Strengthens all family members so they can work on their problems together.
- Teaches ways to handle conflicts and changes within the family differently. Sometimes the way family members handle problems makes them more likely to develop symptoms.

During therapy sessions, the family's strengths are used to help them handle their problems. All members take responsibility for problems. Some family members may need to change their behavior more than others.

Family therapy is a very active type of therapy, and family members are often given assignments. For example, parents may be asked to delegate more responsibilities to their children.

The number of sessions required varies, depending on the severity of the problems and the willingness of the members to participate in therapy. The family and the therapist set mutual goals and discuss the length of time expected to achieve the goals. Not all members of the family attend each session.

### What To Expect After Treatment

People who participate in family therapy sessions learn more about themselves and about how their family functions.

### Why It Is Done

Anyone who has a condition that interferes with his or her life and the lives of family members may benefit from family therapy. Usually, the better the family functions, the lower the stress level for the person with the health problem.

Family therapy has been used successfully to treat many different types of families in many different situations, including those in which:

- The parents have conflict within their relationship.
- A child has behavior or school problems.
- Children or teens have problems getting along with each other.
- One family member has a long-term (chronic) mental illness or substance abuse problem, such as severe depression or an alcohol use problem.

Family therapy can also be useful before problems begin. Some families seek this type of therapy when they anticipate a major change in their lives. For example, a man and woman who both have children from previous marriages may go to family therapy when they marry to help all family members learn how to live together.

The concepts of family therapy can also be used in individual therapy sessions and are very helpful for people who come from families in which there is illness and/or other problems. Adults who lived in poorly functioning families as children may benefit from individual therapy using family therapy concepts.

### How Well It Works

Family therapy is useful in dealing with relationship problems within the family and may help reduce symptoms such as eating disorders (</smartsource/healthwisecontent/Definition/ste122058>) or alcohol use problems. But more specific types of therapies, such as cognitive-behavioral therapy or medicines, may be needed too.

### Risks

- Family therapy can make some problems worse if it is not guided appropriately by a well-trained counselor.
- Therapy may not sufficiently resolve issues if it is stopped too soon.
- Family therapy may be less effective if one family member refuses to participate.

**What To Think About**

For the best results, all family members need to work together with the therapist toward common goals. But if one member refuses to attend sessions, other family members can still benefit by attending.

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Current Procedural Terminology or CPT codes are used by psychologists and other mental health professionals in order to bill their services to an insurance company or Medicaid. This is not a complete list, but simply a list of some of the most commonly used CPT codes in mental health and psychology services, meant as a quick-reference sheet. It has been updated for 2014 code changes.

**Code Description**

- 90791 Psychiatric diagnostic interview without medical services
- 90792 Psychiatric diagnostic interview (for prescribers / medical services)
- 90832 Individual psychotherapy, 30 minutes  
(when performed with an evaluation & management service: 90833)  
Non-Medicare: 90832; Facility: 90832
- 90834 Individual psychotherapy, 45 minutes  
(when performed with an evaluation & management service: 90836)  
Non-Medicare: 90834; Facility: 90834
- 90837 Individual psychotherapy, 60 minutes  
(when performed with an evaluation & management service: 90838)  
Non-Medicare: 90837; Facility: 90837
- 90847 Family Psychotherapy with patient Present  
(without patient present: 90846; multiple-family group psychotherapy: 90849)  
Non-Medicare: 90847; Facility: 90847; with or without patient: 90846; 90849; multiple-family group: 90846; 90849
- 90853 Group psychotherapy  
Non-Medicare: 90853; Facility: 90853
- 96101 Psychological testing, interpretation and reporting per hour by a psychologist (per hour)  
Non-Medicare: 96101; Facility: 96101
- 96102 Psychological testing per hour by a technician (per hour)
- 96103 Psychological testing by a computer, including time for the psychologist's interpretation and reporting (per hour)
- 96105 Assessment of Aphasia
- 96111 Developmental Testing, Extended
- 96116 Neurobehavioral Status Exam (per hour)  
Non-Medicare: 96116; Facility: 96116
- 96118 Neuropsychological testing, interpretation and reporting by a psychologist (per hour)  
Non-Medicare: 96118; Facility: 96118
- 96119 Neuropsychological testing per hour by a technician
- 96120 Neuropsychological testing by a computer, including time for the psychologist's interpretation and reporting
- 96150 Health & Behavioral Assessment – Initial (each 15 mins)  
Non-Medicare: 96150; Facility: 96150
- 96151 Reassessment (each 15 mins)  
Non-Medicare: 96151; Facility: 96151
- 96152 Health & Behavior Intervention – Individual (each 15 mins)

- 96153 Health & Behavior Intervention – Group (each 15 mins)
- 96154 Health & Behavior Intervention – Family with Patient (each 15 mins)
- 96155 Health & Behavior Intervention – Family without Patient (each 15 mins)
- Add ons
- 90785 Interactive complexity add-on (for psychotherapy codes)
- 90839 Patient in crisis add-on – 60 minutes
- 90840 Patient in crisis add-on – Each additional 30 minutes

**Notes:** *See CPT code medical payment codes in 10100-10199, hospital inpatient, outpatient, and emergency department, Ambulatory Surgical Centers (ASCs), and Home Health Care (SHHC, Home Care), and Young Life*

The figures presented below are based on 2015 CPT codes and Medicare payment information. Showing 1 to 1 of 1 entries

Code	Description	Medical Payment***	
		Non Facility*	Facility**
90846	Family psychotherapy (without the patient present) <i>Summer 92, Volume 2, Issue 7, July 1992</i> <i>Nov 97, Volume 7, Issue 11, November 1997</i> <i>Mar 01, Volume 11, Issue 3, March 2001</i> <i>Mar 02, Volume 12, Issue 3, March 2002</i> <i>May 05, Volume 15, Issue 5, May 2005</i> <i>Sep 09, Volume 19, Issue 9, September 2009</i> <i>Mar 10, Volume 20, Issue 3, March 2010</i> <i>Jun 13, Volume 23, Issue 6, June 2013</i> <i>Dec 13, Volume 23, Issue 12, December 2013</i>	107.57	106.76

Showing 1 to 1 of 1 entries

Code	Description	Medical Payment***	
		Non Facility*	Facility**
90847	Family psychotherapy (conjoint psychotherapy) (with patient present) <i>Summer 92, Volume 2, Issue 7, July 1992</i> <i>Nov 97, Volume 7, Issue 11, November 1997</i> <i>Mar 01, Volume 11, Issue 3, March 2001</i> <i>Mar 02, Volume 12, Issue 3, March 2002</i> <i>May 05, Volume 15, Issue 5, May 2005</i> <i>Mar 10, Volume 20, Issue 3, March 2010</i> <i>Jun 13, Volume 23, Issue 6, June 2013</i> <i>Dec 13, Volume 23, Issue 12, December 2013</i>	111.23	110.43

Showing 1 to 1 of 1 entries

Code	Description	Medical Payment***	
		Non Facility*	Facility**
90834	Psychotherapy, 45 minutes with patient and/or family member <i>Jan 13, Volume 23, Issue 1, January 2013</i> <i>May 13, Volume 23, Issue 5, May 2013</i> <i>Jun 13, Volume 23, Issue 6, June 2013</i> <i>Aug 13, Volume 23, Issue 8, August 2013</i>	89.29	88.49

Code Description

Jun 14, Volume 24, Issue 6, June 2014

Showing 1 to 1 of 1 entries

Medical Payment\*\*\*

Non Facility\* Facility\*\*

One thing I thought about today is the number of diagnosed mental health patients we have in our country so I did a little research and learned that the US has approximately 26.1% of Adults 18+ with some type of mental health issue. These run from depression, mood disorders to very severe cases in which inpatient treatment is necessary.

Then I recall Judge Lynda Munro stating in the GAL/AMC course during the spring of 2012 that "one or both parties in a high conflict case have a mental health issue."

I then scanned some of the short calendar days in various jurisdiction and realized on any given day, a courthouse will have anywhere from 50-100 cases. If we do some adding and subtracting depending upon how many motions have been filed, the cases with GALs/AMCs, psych testing, family relation, etc. we will guesstimate 13-26 per courthouse per day at a minimum.

How does the Judicial Branch handle these high conflict cases aka mental health issue parents? They have labeled these parents high conflict therefore they have at least one of the parents have a mental illness BUT yet they don't address the real problem. Full time GAL and co chair of task force stated various times and in a May 2014 email that these parents are "angry" and are out to "destroy us."

Dr. Elizabeth Thayer stated in one of our task force meetings that she (a mental health provider licensed with the state of Connecticut) does not, I repeat, does not treat these parents in high conflict cases because she provides resources to them and consults with them. What these parents need is therapeutic measures to learn how to cope with the most anxiety ridden situation in their lives and behavior modification. They're afraid of losing their children, they're afraid of losing love, being abandoned and starting over. One may say that providing resources and working as a consultant is the same as being a treater but it's not. Dr. Elizabeth Thayer stated there's no DSM code for these families and if she submitted one to the parents behavioral health insurance, this would be insurance fraud. Linda Gottlieb, Dr. Steve Miller and Dr. Robert Horwitz disagreed with Thayers statements.

Perhaps the mental health providers are just as much to blame as the GALs, AMCs, lawyers and judges.